Hospitals - 1935

Alabama.

# 24TH ANNUAL CLINIC OPENS AT TUSKEGEE

## More Than 200 Physicians And Surgeons Registered At Institute

TUSKEGEE INSTITUTE, ALA., April 10.—(Special)—More than 200 physicians and surgeons had registered at the Institute hospital today for the 24th annual clinic and the 18th annual meeting of the John A. Andrew Clinical Society. The sessions which began early Monday morning have been featured by various types of clinics conducted by specialists from the leading medical centers of the United States.

Many of the patients have been brought to the hospital by persons engaged in various kinds of social service who became interested in these suffering men, women and children, and desired to see them restored to their usual health and vigor. In many cases these social agents used their own transportation and were responsible for other expense incident to their travel to Tuskegee, so enthusiastic were they that those in need of this medical attention would find relief and a correction of their disability by attention given them by skillful physicians at the clinic.

Dr. Eugene H. Dibble, medical director at Tuskegee Institute, and secretary-treasurer of the Clinical Society, said "that at more than any time since the establishment of the clinic at Tuskegee, people have become health-conscious and are not only interested in their own relief from suffering but are also interested in relieving the suffering being borne by other members of the human family."

Wednesday night was devoted to a public health meeting established as a permanent memorial to the late Dr. C. V. Roman, Nashville, Tenn., the first president of the clinical society and one of its founders. While Dr. Roman was an ear, eye, nose and throat specialist, he always had a keen interest in and devotion to public health.

Appearing on the program and honoring the memory of Dr. Roman were: Dr. G. Lake Imes, secretary of Tuskegee Institute, who welcomed the visiting physicians in the name of President Robert R. Moton, faculty, students and friends of Tuskegee Institute; address by Dr. J. H. Hale, president, National Medical Association; address by Dr. J. H. Griffin, president, John A. Andrew Clinic Society; address by Dr. M. O. Bousfield associate director, medical activities, Rosenwald Fund; address by Dr. Paul B. Cornely, department of preventive medicine and public health, Howard University School of Medicine, and remarks by Dr. Fred D. Patterson, president-elect, Tuskegee Institute.

Musical numbers were contributed by Jack Montgomery and by the Institute orchestra. Dr. Eugene H. Dibble, Tuskegee Institute medical director and secretary-treasurer of the John A. Andrew Clinical Society, presided.

A feature of the meeting was the sound movie, "That Men May Live," presented through the courtesy of the director general of the American College of Surgeons.

The widow of Dr. Roman came from Nashville to take part in the program.

# 24th Annual Clinic At Tuskegee Inst. Ends; Largely Attended

TUSKEGEE, Ala.—The twenty-fourth annual session of the clinic and the eighteenth meeting of the John A. Andrew Clinical Society which closed here Saturday, were pronounced the most successful that have yet been held, not only in point of attendance by leading physicians, surgeons and specialists throughout the country but also by the number of operations, special treatments and diagnosis that were handled during the daily sessions.

Wednesday night was devoted to a public health session established as a permanent memorial to the late Dr. C. V. Roman of Nashville, Tenn., the first president of the clinical society and one of its founders. Appearing on the program and honoring the memory of Dr. Roman were: Dr. G. Lake Imes, secretary of Tuskegee Institute, who welcomed the visiting physicians; Dr. J. H. Hale, president of the National Medical Association; Dr. J. H. Griffin, president of the John A. Andrew Clinical Society; Dr. M. O. Bousfield, associate director, medical activities, Rosenwald Fund; Dr. Paul B. Cornely of the Howard University Medical School; Dr. Eugene H. Dibble, medical director, Tuskegee Institute and secretary- treasurer of the John A. Andrew Clinnical Society.

Mrs. C. V. Roman came from Nashville to be present and to take a part in the program.

New officers elected were: Dr. L. H. B. Foote, Florida A. and M. College, Tallahassee, president; Dr. U. G. Daily, Chicago, vice president; Dr. Eugenfle H. Dibble, Tuskegee Institute, secretary-treasurer; M. Franklin, Prairie View, general supervisor of clinics; M. Hendrick, Gary, Ind., su

# PLAN HONOR FOR LATE DR. ROMAN, FIRST PRESIDENT

TUSKEGEE INSTITUTE, Ala., April 19.—The twenty fourth annual session of the clinic and the eighteenth meeting of the John A. Andrew Clinical Society which closed here Saturday were pronounced the most successful that have yet been held, not only in point of attendance by the leading physicians, surgeons and specialists throughout the country, but also by the number of operations, special treatments, and diagnosis that were handled during the daily sessions.

The clinic was featured by a wide variety of papers of a highly technical character embracing all phases of the latest methods in the treatment of diseases and the handling of post-operative cases. Roundtable discussions and papers on hospital management occupied a prominent place on the program, and proved to be a most interesting feature of the meetings.

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Appearing on the program and honoring the memory of Dr. Roman were: Dr. G. Lake Imes, secretary of Tuskegee Institute, who welcomed the visiting physicians in the name of President Robert R. Moton, faculty, students and friends of Tuskegee institute; addresses by Dr. J. H. Hale, president, National Medical Association; Dr. J. H. Griffin, president, John A. Andrew Clinical Society; Dr. M. O. Bousfield, associate director, medical activities, Rosenwald Fund; Dr. Paul B. Cornely, department of preventive medicine and public health, Howard University School of Medicine. Dr. Eugene H. Dibble, medical director, Tuskegee Institute, and secretary-treasurer of the John A. Andrew Clinical Society, presided.

### Mrs. Roman on Program

A feature of the meeting was the sound picture, "That Man May Live," presented through the courtesy of the director general of the American College of Surgeons.

Mrs. C. V. Roman came from Nashville, Tenn., to be present and to take part in the program.

The officers elected at the concluding session of the society on Saturday follow: Dr. L. H. B. Foote Florida A. and M. College, Tallahasse, Fla., president; Dr. U. G Daily, Chicago, vice president; Dr Eugene H. Dibble, Tuskegee Institute, Alabama, secretary-treasurer; Dr. J. M. Franklin, Prairie View Texas, general supervisor of clinics; Dr. R. M. Hedrick, Gary, Ind., supervisor, surgical clinics; Dr. B. O Moore, Hopkinsville, Kentucky secretary, surgical clinics; Dr. E T. Taylor, St. Louis, Mo., assistant secretary, surgical clinics; Dr Samuel W. Chavis, Chicago, Ill., supervisor of medical clinics; Dr. G E. Simpson, Owensboro, Ky., secretary, medical clinics; Dr. Leo Wilson, Chicago, Ill., supervisor o obstetrics; Dr. J. J. Peters, Tuskegee, Alabama, supervisor of roentgenology; Dr. Benjamin W. Anthony, Chicago, Ill, assistant supervisor of roentgenology and Dr. C A. Ward, Jacksonville, Fla., supervisor of anaesthetics.

# LEGIONNAIRES SEEK FEDERAL HOSPITAL

## State's Claim To New Project Will Be Advanced By Special Committee

The American Legion's State Executive Committee has inaugurated a movement for securing for Alabama the Government Veterans' Hospital to be erected in one of the Southeastern States, it was announced following a meeting of the committee in Montgomery Sunday, pointing out that Alabama has only one general hospital for whites while several of the other States in the district have two or more, the executive committee by a unanimous vote endorsed the project for this State and launched an intensive effort to get it.

It was announced that the new hospital, which will probably cost nearly $2,000,000, is contemplated for veterans with mental and nervous diseases. The committee's only interest in the matter is to have the hospital located in Alabama and will not endorse any city or town as a site, it was explained. If the hospital is designated to Alabama, a number of municipalities are expected to bid for it.

The committee authorized the payment of expenses of the State Service Officer and Department Commander William S. Pritchard to Washington in an effort to secure the hospital. A committee consisting of W. M. Rayburn, Gadsden; W. G. Hayslett, Tuscaloosa; Dr. G. L. Gilbert, Birmingham; W. A. Abramson, Florence, and Ben F. Rosumny, Montgomery, was named to prepare resolutions of endorsement of the hospital and to head the campaign for securing it.

With only two dissenting votes, the executive committee granted a charter to the first negro post in Alabama. It will be known as Tuskegee Post No. 142. The negro veterans had the endorsement of the white post at Tuskegee, R. M. Howe, commander, and H. E. Woodruff, Opelika, committeeman from the Third Congressional District, appearing at the meeting to ask for the charter. Dr. Patterson, new president of Tuskegee Institute, was also present.

In approving a negro post, the committee made it clear that establishment of similar posts in this State cannot be made without the approval of the white Legionnaires of the community where sought. Tuskegee's application for a charter contained the required number of members. Legion officials said the possibilities there are for a membership of 700 or more. For years a veterans' hospital for negroes has been in operation at Tuskegee, and most of the members of the new post will be enrolled there.

Huntsville, Ala., Times
June 20, 1935

# $300,000 FOR TUSKEGEE

## Several Alabama Cities Made Eligible For New U. S. Buildings

WASHINGTON, June 19 (AP)—A $300,000 item for an addition to the Veterans Hospital at Tuskegee, Ala., to provide 350 beds for negro patients, is carried in the deficiency appropriations bill now before the House.

The bill also puts 12 Alabama cities on a list from which the Treasury and Postoffice departments will make selections for new postoffice buildings. Birmingham, Gadsden, Dothan and Florence were listed for possible expansion or improvement of existing buildings.

Eligible cities for new buildings included Evergreen, Fort Payne, Guntersville, Opp, Roanoke, Scottsboro, Alexander City, Bay Minette, Montevallo, Tuscumbia and Wetumpka. A study now is under way to determine the comparative urgency of construction in the various localities.

## *$350,000 For Tuskegee Hospital Recommended To President*

WASHINGTON—(ANP) — From the $21,250,000 allotted in the Secondary Deficiency Appropriation Bill for hospital construction by the Veterans' Administration, the Federal Board of Hospitalization has just recommended to the President for his approval projects totalling some $6,125,000, according to an announcement by General Frank T. Hines, administrator of Veterans' Affairs and chairman of the Federal Board of Hospitalization.

All projects provide new construction at existing facilities—hospitals or homes—and their completion will provide 3,587 hospital and domiciliary beds for Veterans' Administration patients. Of these, 3,237 are additions and 350 are replacements of unsuitable domiciliary facilities at Togus, Maine; 3,237 for neuropsychiatric patients, 350 of which will be at Tuskegee, Alabama, exclusively for colored patients. The sum set aside for the Tuskegee hospital is $350.000.

Montgomery, Ala. Journal
October 1, 1935

# HALE INFIRMARY ASKS FOR HELP

## Institution Giving Hospital Treatment to Negroes Included in Welfare Drive

Operating under the direct management of a board of trustees, composed of a group of colored citizens, and an advisory board, of some of the most outstanding white citizens of the city, Hale infirmary continues to make its outstanding contribution to the community through its charity and welfare service to sick and injured negroes.

For the past year this work has been greatly facilitated by the good will, efforts and contributions from its many sympathetic and public spirited friends. Fees collected from patrons, have been less than 35 per cent of its income.

The hospital maintains, regularly, several total charity beds, as well as a great number of partial charity beds. During the past 12 months, especially, several hundred charity cases were admitted and received treatment. Many of these had major operations, scores minor operations. Likewise an additional several hundred emergency cases were admitted and received first aid.

**Nurses Are Trained**

The institution has maintained a qualified nurse training school, which has enabled many young women to prepare themselves for a specific vocation and at the same time become useful workers in the relief of illness.

Salaries and general operating expenditures at Hale infirmary have been reduced to a minimum, yet not too low to prevent the most efficient and adequate results.

Reports, in detail, pertaining to the receipts and disbursements are so accurately kept that every dollar contributed can be accounted for. Financial records or reports are submitted to the welfare council annually or as often as deemed necessary. The books of the hospital are open to the public for inspection at all times.

Today the hospital is in immediate need of $4,200 for the maintenance and continuance of the service which has characterized it for the past half century. Opportunity to contribute to this cause will be given to every person in Montgomery during the Charity and Welfare Council's unified appeal for funds which begins October 4.

# Caring For Montgomery Negroes In Ill Health

Hale Infirmary, since 1889 the "good Samaritan" to countless numbers of Montgomery negroes in broken health, is facing somewhat of a crisis in its existence. Funds are low—desperately low.

For several years the doors of the infirmary have remained open only at tremendous sacrifice on the part of the board of trustees, the officials in charge of its actual operation, and those who have contributed faithfully to its support even during the times of economic stress.

The hospital, located at 325 Lake Street, was founded in 1889 by James and Ann Hale, ex-slaves and respected negro citizens of Montgomery. They gave the land and building as a permanent site for the institution.

Since that time the hospital has stood as a community testimonial and has made an outstanding contribution to the city through its charity and nurse training courses. The courses have enabled many young women to become useful workers in the relief of sickness.

The charity wards at the hospital receive almost 1,000 cases annually. This number docs not include certain emergency cases nor a large number of indigent patients who receive treatment from time to time.

Patrons of the hospital have suffered from the general economic stress, but now that more and more persons are receiving fair wages, it is hoped that many will contribute toward its support by signing pledge cards now being distributed by volunteer solicitors of the Montgomery Charity and Welfare Council. Hale Infirmary is one of the nine organizations being aided by the Council in its unified appeal.

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Florida.

Tallahassee, Fla. Democrat
February 17, 1935

# Negro College Opens Clinic

President J. R. E. Lee announce the ninth annual clinic and the seventh annual meeting of the Florida A & M College clinical association will be in session for three days starting today.

Two outstanding physicians, Dr. J. H. Hale and Dr. J. E. Hunter, the former the president of the National Medical association, professor of surgery at Meharry Medical College; chief of the surgical department of Hubbard hospital and surgeon-in-chief of the Mille E. Hale hospital, Nashville, Tenn., and the latter one of the most outstanding surgeons of Lexington, Ky., will act respectively in the capacity of chief and assistant surgeon of the clinic. Two other famous profesisonal who will be guests of the clinical association are Dr. M. E. Ross, gynecologist of New York city and Dr. E. T. Belsaw, dental surgeon of Mobile, Ala.

Physicians from Florida and Georgia comprise the membership of this clinical association and at 8 a. m. the time for the opening of the first 25 physicians had registered.

All local white and colored physicians are cooperating in this clinic—the colored physicians Drs. A. O. Campbell, W. R. Bate, W. H. Baker and A. W. Campbell are in charge of various activities in which they are the most interested. Drs. O. G. Kendrick, F. Clifton Moor, S. M. Salley and others will read papers and head up discussion groups in the several meetings.

The general public is invited to take advantage of this clinic and citizens are asked to inform Dr. Foote, director of the Florida A & M College hospital of any people who need medical attention and hospitalization.

# EDUCATION STRESSED AT HEALTH MEET

## Doctors Operate And Diagnose, But Lecture Also

TALLAHASSEE, Fla. — Aside from the usual benefits of contacts and exchange of ideas, the 9th Annual Clinic and the 7th Annual meeting of the Florida A. and M. College Association, which was held here last week under the direction of Drs. J. H. Hale and J. E. Hunter, both surgeons of national reputation, the meeting was marked by decided educational as well as unusually brilliant operative and diagnostic features. The latter trend is shown by the performance in the three days of the meet of nine major and ten minor operations, and the unusual educational interest was seen in the several scientific meets to which the public was admitted and the two special lectures given in the college chapel.

The operations were performed under the direct personal supervision of Drs. Hale and Hunter, chief surgeon and his assitant repectively. Dr. Hale is President of the National Medical Association, professor of surgery at Meharry Medical College, chief of the surgical department of Hubbard Hospital and surgeon in chief and owner of the Mille E. Hale Hospital at Nashville. Dr. Hunter, who is located in Lexington, Ky., operates a clinic of his own and served in the capacity of surgeon in chief of the clinic of this institution for many years. It was estimated that more than 200 dental and medical cases were handled in the three days of the clinic under the direction of Dr. A. W. Smith, supervisor of the Medical Clinic and Dr. R. N. Gordon, supervisor of the dental clinic.

Under the educational side of the clinic, notable addresses and lectures were given by Dr. Alon P. Smith of the United States Veterans Hospital and Col. J. H. Ward, chief of the same institution, who discussed, respectively "Anthropological Aspects of Psychosexuality" and "Achievement in the Field of Medicine." Dr. J. H. Hale discussed "Benefits Derived from the Florida Clinical Association."

### Cooperating Physicians

Local white and colored physicians who cooperated in the meet included J. R. Bate, acting in the capacity of operating room clerk and Dr. W. H. Baker, as Clerk of the Medical Clinics. Also active were Drs. A. O. Campbell, A. W. Campbell, W. Allen, O. G. Kendrick and F. Clifton Moore. Doctors appearing on the program included C. C. Benton of Port Pierce, T. A. Adams of Daytona Beach, J. H. Hunter of Lexington, Ky., E. T. Belsaw of Mobile, Ala., C. W. E. Dyer of Macon, Ga., A. W. Smith of Jacksonville and J. R. Bate of Tallahassee.

Other physicians attending the clinic were H. A. Anderson, A. W. Smith, W. W. Schell, S. B. Daniels, and Dr. Lord, Jacksonville; J. F. Taylor, Mobile, Ala.; T. H. Lavender, Savannah, Ga.; H. G. Floyd and J. A. Long, Jr., Palatka, Fla.; C. C. Benton, Ft. Pierce, Fla.; R. B. Forde, A. B. Benson and G. H. Starks, Sanford; L. C. Starks, Deland; N. H. Jones and J. L. Potts, J. H. Griffin and M. B. Hutto, Bainbridge, Ga.; M. L. Walton, Thomasville, Ga.; M. A. Cassell, Brunswick, Ga.; A. P. Smith, Tuskegee; R. N. Gordon, St. Augustine, Fla.; J. W. Floyd, Millen, Ga.; J. R. Bate, W. H. Baker, W. A. Campbell, A. O. Campbell, E. T. Belsaw, guest dental surgeon from Mobile, Ala., and T. A. Adams of Daytona.

A total of 36 doctors and dentists are assisting with this clinic from the states of Tennessee, Alabama, Kentucky, Georgia, and Florida.

Daytona Beach Sun-News

## NEGRO DOCTORS PROTEST

We noticed in Friday's issue, May 10, of The News-Journal under proceedings of the hospital board—that Supt. Dorothy Thurston was instructed to "write letters to the staff of the negro hospital reprimanding them because it is often difficult to find a physician when needed around the hospital." As a preamble to what follows we contend that inasmuch as there are always two sides to a question, that courtesy should have been extended to us in hearing our side before resorting to such a proceedure.

We resent any such action on the part of the board in attempting to assume such or to delegate the same to any one else. We are not children, students nor hired servants. Our service to our people in the negro hospital is loyal, continuous, trying and fraught with many difficulties, all without one dime of remuneration.

We wonder if the board in question is aware of the fact that three colored physicians, one each month or four times a year, serve ninety percent of the emergency charity cases of Ormond, Holly Hill, Daytona Beach, Port Orange and adjacent territory? Do you know that the hospital is located in the center of a crowded district where as many as eight to ten emergencies have come in during a night?

We wonder if you know that every one who sustains the slightest injury from afar or near, as a rule, comes or is brought to the hospital feeling that the attendants are duty bound to give them service regardless of the hour of night, conditions or pay. We wonder if you know that there are fully fifty percent more of these cases among negroes coming to the colored hospital immediately within their reach, than there are white persons under the same conditions going to the white hospital several miles away?

Another question — Do you realize that there are only three colored physicians serving this greater number while eighteen regular staff physicians (not including consultants) of the white hospital serve a smaller number once a month, and if each are on duty as we are, serve only once in eighteen months while we serve six times within the same period? If the board had a well paid staff it certainly could not expect much more.

It occurs very rarely that one of us cannot be reached within a short while, however, if the opposite condition obtains, we are most likely to be off on errands that mean much to the betterment of our own welfare. In this respect we are akin to others for we know of no one in these times who is playing the part of a good Samaritan while wolves of hunger gnaw at his vitals. We are all, even the members of the hospital board, haplessly engaged, to an extent, in a work of mercy, yet important as it may seem, the board and the rest of us will take a recess when our personal or material interests are involved. We submit that such an order is in open conflict with the established facts, therefore we resent even a presumption of such authority.

Our attitude in this matter is defensive rather than offensive. As much as we desire to serve the unfortunate members of our own race, it is not our wish to stand in the way of some one who will do it better and more loyally. If you have in mind any person or group of persons who will serve the purpose better, and, if you expect of us any more than what we are doing now—you herewith have our resignation.

J. SETH HILLS,
T. A. ADAMS,
JOHN T. STOCKING.

Pensacola, Fla. Journal
August 1, 1935

# SEEK HOSPITAL FOR NEGROES

## Steps Taken To Care For Tuberculosis Cases

Plans for establishing a tuberculosis hospital for negrces in Escambbia county were discussed at a meeting at the city hall yesterday afternoon. Officers of the Kiwanis club met with a committee of negroes to talk over plans for the project.

Members of the club, who were instrumental in establishing the new Escambia county tubercular sanitorium, explained to members of the committee that it was probable the government would provide a building if citizens could provide for operation of the hospital.

The negroes plan to ask the government through its public works project to erect a small 15-bed hospital to care for tuberculosis cases in this county.

Pensacola, Fla. Journal
September 1, 1935

# COLORED FOLKS MAKING APPEAL FOR HOSPITAL

## Last-Minute Campaign Must Net $500 For Sanatorium For Tuberculars

Colored citizens are staging a last minute effort to increase their tuberculosis hospital sponsorship by $500 by September 5, according to announcement last night by F. D. Browne, committee chairman, and Dr. E. F. Aarons, Jr., hospital chairman.

"We are appealing to our friends to come to our assistance in that rally," said Browne. "There is no further need to point out the value of this hospital and the benefits to come from its establishment. There is but one question uppermost in our minds—can we get the necessary $500?"

Browne asks that when members of his committee come to both white and colored citizens for donations that they not be refused. The colored people of the city have been working a long time through their own efforts to get this tuberculosis hospital and it is only in this last-minute appeal that they ask their white friends to give to make the hospital possible. All of the funds received from this effort will go to the Escambia County Tuberculosis association by which they will be administered.

"Do not delay to contact us should we fail to see you and it is your desire to make a contribution," was the appeal of Dr. Aarons. "Because of the time limit and the holiday Monday the opportunity is passing and the institution may be lost if we do not get subscriptions. Phone us at 4324, if you wish to make a donation and it will be called for."

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General

Montgomery, Ala., Advertiser
March 21, 1935

# Negro Hospitalization Program On National Scale Is Introduced Here

The Rev. Amos H. Carnegie, of New York City, founder and executive secretary of the Negro National Hospital Fund, arrived in Montgomery last night to make a survey here of the hospitalization situation among negroes, as part of a nationwide survey of the hospitalization, medical education and nurse training problems of the negro race, preparatory to launching a nationwide campaign October of this year to raise $150,000,000 in 20 years to finance the program of the movement.

The program calls for the establishment of a standard hospital for the negro race in every city of the nation, where there are 10,000 or more negroes. There are 90 such cities in the country with five in this State—Birmingham with 100,000; Montgomery, with 30,000; Mobile, with 25,000; Bessemer, with 12,000, and Selma, with 10,000.

Fifteen of these hospitals will be teaching hospitals, which will be affiliated with medical colleges in the North East, West and Middle West, in which a constructive and forward-looking teaching program will be carried out for undergraduates, interns, postgraduates, nurses and social workers, preparing them for administrative leadership in the hospitals all over the country. Already, 10 of these medical colleges have indicated their willingness to cooperate.

A national board of trustees has already been organized in New York, representing the professions and the laity, in a ratio of three colored to two white leaders, who will administer the funds of the movement.

The purpose of the Rev. Carnegie's visit here is not only to survey the hospitalization problem among his people, but also to study the reaction of the colored and white leaders to the proposition and to seek their cooperation and endorsement. The movement has already won the endorsement of a number of the nation's most distinguished leaders in every walk of life, particularly the fields of religion, education, medicine, law, hospitals, big business, banking and journalism.

The funds will be raised through a private and voluntary contribution of an average of one cent per week from each of the 12,000,000 negroes throughout the United States, for a period of 20 years, which will be collected through the 42,600 negroe churches in the country and the bankers with whom the churches do business. A collecting bank, fitted with a Yale lock, will be placed in each church and the key deposited with the banker. Every three months a nationwide rally will be held, at which time a committee of three from each church, with the pastor as chairman, will take the bank to the banker, have him open it before them, count the contents, buy a cashier's check with the amount and send it to the treasurer.

Every individual, however, who gives $1 or more to the fund will send it direct to the treasurer in postoffice money order or check, acknowledgement of which will be made monthly in the official organ of the movement, "The National Hospitalizer."

The movement is interracial, non-sectarian, non-profit and humanitarian in every respect. It aims to provide adequate hospitalization for the negro race in America and proper training for negro physicians, nurses and social workers.

The first hospital will be built in New York, which is estimated to cost $3,500,000. It will be affiliated with Columbia University as the first teaching hospital.

Alexandria, La. Town Talk
April 3, 1935.

# NEGRO HOSPITAL LEADER IS HERE

## Founder of Fund to Provide Hospitalization for Race to Make Survey

Rev. Amos H. Carnegie of New York City, arrived in Alexandria today to make a survey of the hospitalization problems among the negroes here.

He is the founder of the Negro National Hospitalization Fund which plans to raise in twenty years, $150,000,000, for the purpose of founding a chain of ninety hospitals for the negro race in the United States. Each city with 10,000 or more negroes will receive a hospital, he said.

In Louisiana plans call for establishing units at New Orleans, Shreveport, Baton Rouge, Monroe, and Alexandria.

This afternoon at 4 o'clock, Rev. Carnegie will speak to the negro physicians and business men on the plan.

A national board of trustees has been set up to administer the fund, he said, at the ratio of three negroes to two white men.

Fifteen of the hospitals to be established will be for training negro physicians, nurses and social workers.

The money is to be raised, he said, by contributions of one cent per week from the 12,000,000 negroes of the United States, and will be collected through the 42,000 negro churches and banks with which they do business.

He declared that the movement is inter-racial, non-sectarian and is not launched for profit. He also said that several medical colleges had pledged support and that the 21 states have been surveyed already. Others will be surveyed by August 31. He said that many civic and business as well as church leaders of the United States have endorsed the move.

The first hospital will be built at a cost of $3,500,000 in New York City, and will be affiliated with Columbia University. Rev. Carnegie declared.

## Just Another Racket

Oklahoma City was visited Monday by a man who proposes a national hospital movement, and one which he says within twenty years will place a hospital in every city where they are as many as 10,000 Negroes. While all will agree that the proposed objective is worth while and laudable, reason would argue that one would want to know something about the antecedents of the promoter, and still more about the plan by which he proposed to raise his phantom $150,000,000.

To the credit of the Oklahoma City Negro Business League, they took the heat out of the stranger's proposal and reduced the statement to the cold analysis of reason. The League members wanted to know more about the plan to put a contribution box in every Negro church and thus get a penny a month from every one of the fifteen million Negroes in America. It was the first time in history they have been told that Negroes could be so counted.

Of course, you know as well as this writer that Negroes cannot be counted in any such fashion. One cannot say there are 15,000 Negroes in Oklahoma City and therefore I am going to have 15,000 votes cast for a certain cause. First of all, one has to eliminate the children who can't vote, and then still another elimination must be made when one checks out the Negroes who will not vote. Measured by such a yardstick the 15,000 Negro population in Oklahoma City shrinks to about 2,000 voters.

It does not cost anything to vote, but when one starts out to count folk who are going to spend their money on an idea of a stranger, the count gets lighter. We wish there were some method by which one could regiment Negroes into working for common causes. All other races in this country find a point where they run together except Negroes, but even they cannot be blamed when they refuse to go under the banner of some imposter who offers only an empty vision.

The Black Dispatch hopes that Negroes everywhere will refuse to have anything to do with the National Negro Hospital Fund. It is only another racket calculated to end in failure and thus reduce the Negro's confidence in his own efforts. The plan as suggested to the Oklahoma City Negro Business League is in no wise feasible or workable. Only a man who ought to be in an insane asylum would attempt to play upon the ignorance and gullibility of his people. There are too many worth while projects in the United States manned by Negroes of known probity and worth to go off cat-napping with a will-o'the-wisp such as Oklahoma City entertained Monday.

Richmond, Va. News-Leader
April 18, 1935

# Negro Hospital Bill Introduced

## Darden Proposes Million Dollar Institution for Virginia.

By News Leader Staff Correspondent.

WASHINGTON, April 18—While Congressman Colegate W. Darden of Norfolk, is patron of a bill for a million dollar hospital in Virginia for Negro veterans, there is no likelihood that it will receive serious attention.

Provision is made in the Roanoke hospital for care of Negroes as well as white veterans, in separate wards, and if existing facilities prove inadequate, additions can and will be made by the government.

As a matter of fact, it is understood that already the veterans administration realizes the need for increased facilities at the Roanoke hospital, and plans for two new units, one for Negro patients are said to be before the president for approval. Details are withheld.

Congressman Clifton A. Woodrum, of Roanoke, whose persistence and activity are credited with the administration's decision to build the hospital at Roanoke foresees early taxing of the facilities of the institution.

Commenting, he declared that there are sufficient mental cases among Virginia veterans to fill every bed right now.

Mr. Darden apparently introduced his bill by request of a constituent. It is before the house veterans' committee. Following routine procedure, it probably will be referred to the veterans' administration for a report.

# Rev. Amos Carnegie Plans For National Hospital For Negroes

Rev. Amos H. Carnegie, of New York City, founder and executive secretary of the Negro National Hospital Fund, recently completed a nation-wide survey of the hospitalization, medical education and nurse training problems of the Negro race, preparatory to launching a nation-wide campaign next month to raise $200,000,000 in twenty-five years for the purpose of establishing a standard hospital for the Negro race in every city of the nation, where there are 10,000 or more Negroes, and six tuberculosis sanitoriums, which will be located at strategic points, where the climatic conditions favor such service. There are 90 such cities in the country, with one in this state—Boston, which has a population of 40,000. The program for Boston is a 100 bed hospital, which is estimated to cost $500,000 to build and equip and $1,000,000 to endow.

Rev. Carnegie traveled 38,000 miles in thirteen months over the 48 states of the Union to get a first hand knowledge of the status of the Negro patient, physician and nurse in the medical colleges, municipal, state, county and Negro hospitals of the country. He also secured a nation-wide endorsement of the program of the movement from the nation's most distinguished leaders, representing every walk of life, particularly in the the fields of religion, education, medicine, state, law, banking, big business, hospitals and journalism. Twenty eight governors, including Governor James M. Curley of this state, Governor Charles M. Smith of Vermont and Governor H. S. Bridges of New Hampshire; 38 medical schools, including Harvard University School of Medicine, Boston University School of Medicine and Tufts School of Medicine endorsed it. The executive committee of the Bay State Medical Society of the Negro race also endorsed it.

There was a movement in this city some time ago, headed by Dr. Cornelius N. Garland, Dr. T. E. A. McCurdy and others for the founding of a Negro hospital, which miscarried. The Negro National Hospital Fund will co-operate with the leaders of this movement and help them to revive it and realize their dream of a standard hospital in which Negro physicians and nurses may be trained and in which they may have an opportunity of practising their profession.

Several of the hospitals will be teaching hospitals, which will be affiliated with medical schools all over the country for the training of physicians, nurses and social workers to carry out the program administratively all over the country. Seventeen medical schools, including Harvard University School of Medicine, have indicated their willingness to cooperate.

A National Board of Trustees, representing the professions and the laity, in a ratio of three colored to two white leaders will administer the funds of the movement. This board has already been organized.

The funds will be raised through a private and voluntary contribution of an average of one cent per week from each of the 12,000,000 Negroes throughout the United States for a period of twenty-five years, which will be collected through the 42,600 Negro churches in the country and the bankers with whom the churches do business. A collecting bank, fitted with a Yale lock, will be placed in each church and the key deposited with the banker. Every three months a nation-wide rally will be held, at which time a committee of three from each church will take the bank to the banker, have him open it before them, count the contents, buy a cashier's check with the amount and send it to the treasurer in New York, who will be an outstanding banker. Every person, however, who gives one dollar or more to the fund will send it direct to the treasurer in post office money order or check, acknowledgment of which will be made monthly in the official organ of the movement—The National Hospitalizer.

As often as funds come in, hospitals will be built, equipped and endowed until the entire program is completed in twenty-five years.

CINCINNATI, O.
POST

NOV 15 1935
NEGRO HOSPITAL

**Institution For Exclusive Care of Race to Be Built Here**

Cincinnati will be among the major cities of the country in which hospitals for the exclusive care of Negroes will be established, according to the Rev. Amos H. Carnegie, New York.

Mr. Carnegie, founder and executive secretary of the Negro National Hospital fund, was in Cincinnati today to confer with local Negro leaders and medical authorities.

Under the plan, a 100-bed hospital will be erected here at a cost of $500,000 for building and equipment, including a nurses' home, and have a $1,000,000 endowment. Funds will be raised by contributions of one cent a week from each of the 12,000,000 Negroes in the United States. Mr. Carnegie said.

CINCINNATI, O.
ENQUIRER

NOV 15 1935

## Negro Leaders Confer On Hospital Program

Negro leaders of Cincinnati met yesterday with Rev. Amos H. Carnegie, New York, Executive Secretary of the Negro National Hospital Fund, to discuss plans for the establishment of standard hospitals for Negroes thoughout the country.

Rev. Mr. Carnegie said plans had been formulated to accumulate a fund of $200,000,000 over a 25-year period to establish hospitals for Negroes in 90 cities having Negro populations of 10,000 or more. Hospitals would be built in seven Ohio cities, Cincinnati, Cleveland, Columbus, Dayton, Toledo, Youngstown, and Akron, he said.

A 100-bed hospital to cost $500,000 to build and equip is planned for Cincinnati, he said. An endowment of $1,000,000 will be sought for this institution, he declared.

## Geo. E. Wibecan Is Elected Head Of Nat'l Hospital Fund

At a meeting of the National Board of Trustees of The Negro National Hospital Fund, which met at Dr. Ralph W. Sockman's church Park avenue at 60th street, the officers of the movement were elected, the constitution and by-laws unanimously adopted, he nation-wide twenty-five-year-campaign to raise $200,000,000 officially launched, and the Dunbar National Bank unanimously selected as the depository of the funds of the movement.

The officers elected were George E. Wibecan, president of the Crispus Attucks Community Council, a militant civic organization, and former Grand Exalted Ruler of the Elks, was unanimously elected president of the movement; C. C. Huitt, president of the Dunbar National Bank, was unanimously elected treasurer; Dr. Walter Merrick, brilliant New York physician and surgeon, was unanimously elected vice-president; Charles H. Woods, a young and brilliant musician was elected recording secretary; Rev. Amos H. Carnegie, founder of the movement, who was elected executive secretary eighteen months ago, still retains that position.

The newly eleced president of the enterprise made a brief and brilliant address defending the aims and purposes of the Negro National Hospital Fund and emphasized the fact that the movement was a manly effort to provide the race with its own facilities for professional, cultural, social and economic development which for the Negro, as for every other race, was a divine and citizenship right.

Rev. Amos H. Carnegie gave a brief report of his nation-wide survey of the hospitalization, medical education and nurse training problems of his race. He presented the written endorsement of 35 governors, 38 medical schools, stretching from Boston to Los Angeles and from New York to New Orleans, 40 mayors of cities with 10,000 or more Negroes in which hospitals will be established, under the plan of the Negro National Hospital Fund, fifteen of the country's greatest university president, scores of hospital executives, bankers, big business men, chambers of commerce, lawyers and publishers. He presented also the endorsements of six hundred Negro leaders throughout the United States. He traveled 40,000 miles in fourteen months over the 48 states of the Union to make a first hand study of the hospital needs of his people and to secre a nation-wide endorsement of the project, preparatory to launching the nation-wide campaign. He had the facts and moral backing of the entire nation, he said, and he was now ready for the fight for 90 general hospitals throughout the United States, one in every city where there are 10,000 or more Negroes and six tuberculosis sanatoriums, which will be located at strategic points, where the climatic conditions favor such service. He also presented clippings from 200 of America's most powerful newspapers from all parts of the United States, which have already given the movement nation-wide publicity.

Hospitals-1935

General.

# TO CAMPAIGN 25 YEARS FOR NATIONAL INSTITUTION

## Endorsed By 35 Governors And 38 Medical Schools Over Country

New York, Nov. 27—At a meeting of the National Board of Trustees of the Negro National Hospital Fund, which met at Dr. Ralph W. Sockman's church, Park Avenue at 60th Street, New York City, on Monday, November 4th, at 8 P. M., the officers of the movement were elected, the constitution and by-laws unanimously adopted, the nation-wide twenty five year campaign to raise $200,000,000 efficiently launched, and the Dunbar National Bank unanimously selected as the depositary of the fund.

The officers elected were: Mr. George B. Wibecan, President of the Crispus Attucks Community Council, a millitant civic organization, and former President of the Elks of America, was elected President, Dr. Walter Merrick, a brilliant New York physician and surgeon, Vice President; Mr. C. C. Huitt, President of the Dunbar National Bank, Treasurer; Mr. Charles H. Woode, a young and brilliant musical genius, Recording Secretary. Rev. Amos H. Carnegie, founder of the movement, who was elected Executive Secretary eighteen months ago, still retains that position.

The newly elected President of the enterprise in a brief and brilliant address defending the aims and purposes of the Negro National Hospital Fund, emphasized the fact that the movement was a manly effort to provide the race with its own facilities for professional, cultural, social and economic development and leadership which for the Negro, as for any other race, was a divine and citizenship right.

Rev. Amos H. Carnegie gave a brief report of his nation-wide survey of the hospitalization, medical education and nurse training problems of his race. He presented the written endorsement of 35 governors, 38 medical schools, stretching from Bostoi to Los Angeles and from New York to New Orleans, 40 Mayors of cities with 10,000 or more Negroes in which hospitals will be established, under the program of the Negro National Hospital Fund, fifteen of the country's greatest university presidents, scores of hospital executives, bankers, big business men, chambers of commerce, lawyers and publishers. He presented also the endorsement of 000 Negro leaders throughout the United States. He traveled 10,000 miles in fourteen months over the 48 states of the Union to make a first hand study of the hospital needs of his people and to secure a nation-wide endorsement of the project, preparatory to launching the nation-wide campaign. He had the facts and the moral backing of the nation, he said, and he was ready for the fight for 96 general hospitals throughout the United States, one in every city with 10,000 or more Negroes and six tuberculosis sanatoriums, which will be located at strategic points, where the climatic conditions favor such service. He also presented clippings from 200 of America's most powerful newspapers from all over the United States, which have already given the movement nation-wide publicity.

Among the gentlemen who came to assist in the launching of the nation-wide campaigns for funds were: Dr. Millard L. Robinson, Secretary of the New York Bible Society, Mr. C. C. Haitt, President of the Dunbar National Bank, Dr. Thomas P. Potter, Associate Editor of the General Minutes of the Methodist Episcopal Church, and Mr. John Nutry, a Brooklyn manufacturer.

National headquarters will be opened right away and the machinery set in motion for a successful nation-wide, twenty five year campaign.

# Nation-Wide Hospital Movement Opposed

DR. C. A. LANON

SOUTH BROWNSVILLE, Pa.—Cracking down in the Rev. Amos Carnegie, who they allege is soliciting funds for a hospital in every city with a population of 10,000 or more, Dr. C. A. Lanon, secretary of the National Medical Association, made public anti-Carnegie resolutions passed recently by the association.

**Hospitals Curtailed**

**The resolution pointed out that a large number of standard hospitals have been forced to close although needed by the community; and hospitals that are in existence are now operating at a deficit.**

The medical association not only opposes collection of funds by the Rev. Mr. Carnegie, but advises the public to consult commercial and medical agencies in their cities for intelligent information and proper procedure in the construction and support of hospitals. Investigate before you give, the association recommended.

DR. AMOS CARNEGIE

## Lynchburg Balks at Chain Hospital Project

LYNCHBURG, Va. — The twenty - five - year financial scheme of the National Hospital Fund, founded about two years ago by the Rev. Amos H. Carnegie, to raise $200,000,000 for the establishment and endowment of a chain of colored hospitals, was held to be impracticable by a group of citizens at a mass meeting here Sunday at Jackson Street Methodist Church.

Hospitals - 1935

General.

# Negro Hospital Fund

*A Penny a Week for Two Decades Is the Goal of Drive*

A penny a week for twenty years from each of the 12,000,000 Negroes in the United States is the goal set by the National Negro Hospital Fund in a combined health and religious program for the race, the Rev. Amos H. Carnegie, General Secretary of the Fund, said in an interview.

The pennies will be deposited in collection-boxes in 42,600 churches. Each church-member has been pledged to bring another member into the fold. Every three months a nation-wide rally will be held, at which the pastor and a committee from each church will preside at the opening of the boxes, and transfer the contents to the Fund Treasurer in New York.

"At present hospital facilities for the training of negro physicians, nurses, and social workers are almost non-existent," said the Rev. Mr. Carnegie. "Except for Harlem Hospital in New York City and the Cleveland City Hospital, and a few in the South, there is no institution where the physicians and nurses who serve a tenth of the population may practise.

## • For Better Hospitals

"Only twelve hospitals in the country for the training of negro physicians are approved by the American Hospital Association and the American College of Surgeons. Two medical colleges—Howard and Meharry—have their qualified approval."

At the Philadelphia meeting of the National Medical Association, a negro organization, last fall, Dr. W. G. Alexander of Orange, New Jersey, then President, said:

"The facilities of our medical schools must, therefore, be increased; and, along with the increase in facilities, there must be improvement both in the physical equipment of the schools and the teaching forces.

"Altho the schools have labored under tremendous disadvantages, and have done the best that they could with the resources in their hands, yet it is rather a reflection upon us that the equipment of our institutions is so poor—both in quality and quantity, and by comparison with other schools of this country—that we can hardly feel that we can really have two standard institutions."

Rev. A. H. Carnegie

Fifteen of the hospitals contemplated under the program will be teaching hospitals, which will be affiliated with medical colleges in the North, East, West, and Middle West for constructive education for undergraduates, internes, postgraduates, nurses, and social workers, preparing them for administrative leadership in hospitals.

The ultimate aim is to establish a standard hospital for the negro race in every city where there are 10,000 or more Negroes.

Literary Digest 2-23-35


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Rev. A. H. Carnegie

LAFAYETTE, IND.
JOURNAL & COURIER

FEB 1 1935

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The ultimate aim is to establish a standard hospital for the Negro race in every city where there are 10,000 or more Negroes.

## COLORED STAFF ON HOSPITAL STAFFS

The inclusion of Colored physicians on municipal hospital staffs in Cleveland, Harlem, and in the newly completed Queens General Hospital, New York, naturally prompts the query, Why are there no Colored physicians on Boston City Hospital staff?

No valid reason can be advanced for refusing Colored physicians equal opportunity with others in municipal hospitals of Massachusetts. The answer seems to be that no race physician has ever aspired for such staff appointment. It therefore would seem that qualified members of the profession should seek positions on hospital staffs if for no other reason than to round out the record of the race's achievements in the birthplace of liberty and equality.

Christian Century 2-27-35

Boston Herald 2-25-35

# MACON INCLUDED IN NATION-WIDE HEALTH PROGRAM FOR NEGROES

## Negro Founder of Hospital Fund Comes Here to Survey Hospital Needs

Rev. Amos H. Carnegie of New York city, Negro founder and executive secretary of the Negro National Hospital fund, arrived in Macon last night to make a survey of the local hospitalization situation among Negroes, as part of a nation-wide survey of the hospitalization, medical education and nurse training problems of the Negro race, preparatory to launching a nation-wide campaign to raise $150,000,000 in 20 years to finance the movement.

The program calls for the establishment of a standard hospital for the Negro race in every city of the nation, where there are 10,000 or more Negroes. There are 90 such cities in the country, with five in this state—Atlanta, with 100,000; Savannah, with 45,000; Augusta, with 30,000; Macon, with 25,000, and Columbus with 16,000.

Fifteen of these hospitals are to be teaching hospitals, which will be affiliated with medical colleges in the North, East, West and Middle West, in which a constructive and forward-looking teaching program will be carried out for undergraduates, internes, postgraduates, nurses and social workers, preparing them for administrative leadership in the hospitals all over the country. Already, 10 of these medical colleges have indicated their willingness to co-operate.

**Board Already Functioning**

A national board of trustees for the fund already has been organized in New York, representing the professions and the laity, in a ratio of three Negroes to two white leaders, who will administer the funds of the movement.

The purpose of the Negro's visit here is not only to survey the hospitalization problem among his people, but also to study the reaction of the Negro and white leaders to the proposition and to seek their co-operation and endorsement.

Where there is a local hospital already in existence, the movement will co-operate with the management of the hospital and enlarge and improve its facilities for a more scientific approach to the problem of Negro health.

**Raising the Money**

The funds will be raised through a private and voluntary contribution of one cent per week from each of the 12,000,000 Negroes in the United States for a period of 20 years, which will be collected through the 42,600 Negro churches in the country and the banks with whom the churches do business. A collecting bank, made of solid steel, fitted with a Yale lock, will be placed in each church and the key deposited with the banker. Every three months a nation-wide rally will be held, at which time a committee from each church, with the pastor as chairman, will take the bank to the banker, have him open it before them, count the contents, buy a cashier's check with the amount and send it to the treasurer in New York, who will be an outstanding banker. Every person, however, who contributes $1 or more to the fund will send it direct to the treasurer in post office money order or check, acknowledgement of which will be made monthly in the official organ of the movement—"The National Hospitalizer."

Augusta, Ga. Herald
March 19, 1935

# NEGRO GROUP IS SEEKING INCREASE OF HOSPITAL WORK

The Rev. Amos H. Carnegie, of New York City, founder and executive secretary of the Negro National Hospital Fund, arrived in Augusta Thursday to make here a survey of the hospitalization situation among Negroes, as part of a nation-wide survey of the hospitalization, medical education and nurse training problems of the Negro race, preparatory to launching a nation-wide campaign in October, of this year to raise $150,000,000 in twenty years to finance the program of the movement.

The program calls for the establishment of a standard hospital for the Negro race in every city of the nation, where there are 10,000 or more Negroes. There are 90 such cities in the country, with five in this state—Atlanta, with 100,000; Savannah, with 45,000; Augusta, with 30,000; Macon, with 25,000; and Columbus with 16,000.

The movement is interracial, non-sectarian, non-profit, and humanitarian in every respect. It aims to provide adequate hospitalization for the Negro race in America and proper training for Negro physicians, nurses and social workers.

The first hospital will be built in New York City, which is estimated to cost $3,500,000. It will be affiliated with Columbia University as the first teaching hospital.

The Rev. Carnegie has already surveyed 17 states. He will complete the survey of the 48 states by August the 31st.

The movement has been endorsed locally by the colored medical society, the Dean of the Georgia College of Medicine, the Superintendent of the University Hospital and the acting mayor, Charles H. Pitts.

Atlanta, Ga. Constitution
March 30, 1935

## NEGRO HOSPITAL FUND OFFICIAL REACHES CITY

A survey of the hospitalization conditions among the negroes of the city will be undertaken by Rev. Amos H. Carnegie, founder and executive secretary of the Negro National Hospital fund, who arrived in Atlanta Friday night.

The survey is part of a national study preparatory to launching a nation-wide campaign in October to raise $150,000,000 in 20 years to finance the establishment of a standard hospital for negroes in every city in the United States where the negro population is 10,000 or more, he stated.

# Negro Hospitalization Program On National Scale Is Introduced Here

The Rev. Amos H. Carnegie, of New York City, founder and executive secretary of the Negro National Hospital Fund, arrived in Montgomery last night to make a survey here of the hospitalization situation among negroes, as part of a nationwide survey of the hospitalization, medical education and nurse training problems of the negro race, preparatory to launching a nationwide campaign October of this year to raise $150,000,000 in 20 years to finance the program of the movement.

The program calls for the establishment of a standard hospital for the negro race in every city of the nation, where there are 10,000 or more negroes. There are 90 such cities in the country, with five in this State—Birmingham, with 100,000; Montgomery, with 30,000; Mobile, with 25,000; Bessemer, with 12,000, and Selma, with 10,000.

Fifteen of these hospitals will be teaching hospitals, which will be affiliated with medical colleges in the North, East, West and Middle West, in which a constructive and forward-looking teaching program will be carried out for undergraduates, interns, postgraduates, nurses and social workers, preparing them for administrative leadership in the hospitals all over the country. Already, 10 of these medical colleges have indicated their willingness to cooperate.

A national board of trustees has already been organized in New York, representing the professions and the laity, in a ratio of three colored to two white leaders, who will administer the funds of the movement.

The purpose of the Rev. Carnegie's visit here is not only to survey the hospitalization problem among his people, but also to study the reaction of the colored and white leaders to the proposition and to seek their cooperation and endorsement. The movement has already won the endorsement of a number of the nation's most distinguished leaders in every walk of life, particularly the fields of religion, education, medicine, law, hospitals, big business, banking and journalism.

The funds will be raised through a private and voluntary contribution of an average of one cent per week from each of the 12,000,000 negroes throughout the United States, for a period of 20 years, which will be collected through the 42,600 negroe churches in the country and the bankers with whom the churches do business. A collecting bank fitted with a Yale lock, will be placed in each church and the key deposited with the banker. Every three months a nationwide rally will be held, at which time a committee of three from each church, with the pastor as chairman will take the bank to the banker, have him open it before them, count the contents, buy a cashier's check with the amount and send it to the treasurer.

Every individual, however, who gives $1 or more to the fund will send it direct to the treasurer in postoffice money order or check, acknowledgement of which will be made monthly in the official organ of the movement, "The National Hospitalizer."

The movement is interracial, non-sectarian, non-profit and humanitarian in every respect. It aims to provide adequate hospitalization for the negro race in America and proper training for negro physicians, nurses and social workers.

The first hospital will be built in New York, which is estimated to cost $3,500,000. It will be affiliated with Columbia University as the first teaching hospital.

Birmingham, Ala. News
March 20, 1935

# NEGRO HOSPITAL SURVEY PLANNED

## Investigation Here Part Of Nation-Wide Campaign

The Rev. Amos H. Carnegie, of New York City, founder and executive secretary of the Negro National Hospital Fund, arrived in Birmingham Wednesday to make a survey of the hospitalization situation among Negroes, as part of a nation-wide survey of the hospitalization, medical education and nurse training problems of the Negro race preparatory to launching a nation-wide campaign in October to raise $150,000,000 in 20 years to finance the movement.

The program calls for establishment of a standard hospital for the Negro race in every city of the nation where there are 10,000 or more Negroes. There are 90 such cities in the country, with five in this state—Birmingham, with 100,000; Montgomery, with 30,000; Mobile with 25,000; Bessemer, with 12,000 and Selma, with 10,000.

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The funds will be raised through a private and voluntary contribution of an average of 1 cent per week from each of the 12,000,000 Negroes throughout the United States for a period of 20 years, which will be collected through the 42,600 Negro churches in the country and the banks with whom the churches do business.

## $2,920,500 TO BE SPENT ON VETS' PROJECTS

WASHINGTON, April 6.—(AP)—The veterans bureau announced today President Roosevelt had approved construction projects at veterans' administration facilities throughout the country to cost $2,920,500.

Two new hospital buildings of 165 beds and 138 beds, respectively, for negro beneficiaries will be erected at the neuropsychiatric hospital at North Little Rock, Ark., and alterations will be made to other buildings providing an increase of 52 beds for veteran beneficiaries at a total cost of $620,500.

Hospitals - 1935.

Georgia

## URBAN LEAGUE WEEKLY BULLETIN

By JESSE O. THOMAS.

In the city of Atlanta there are 23 hospitals with a total bed capacity of 8,000. Only 17 of the private hospitals have charity wards. Although the negro is one-third of the total population of Atlanta and Fulton county, there are only 266 of the 8,000 beds available for his hospitalization and medical care. These 266 beds are provided for negroes at Grady hospital. He is not admitted to any of the 17 hospitals mentioned above which have charity wards.

The negro division of Grady hospital is a semi-public and semi-private institution. It is operated under joint auspices of the city of Atlanta and Emory University. While negro patients are received as charity patients would be at a hospital in complete municipal control, negro physicians that are part of the taxpaying population, are denied the privilege of treating their patients in Grady hospital.

If the contention that medical authorities make that clinical practice is necessary to thoroughly equip and keep physicians abreast to meet the demands of advanced medicine, then automatically the negro is denied the opportunity of developing on a parity with white physicians. It means also that so far as negro patients are limited to treatment of negro physicians, that they don't have equal opportunities with white patients or receive the benefit of newest experiments in the field of medicine. If the "We learn how to do by doing" slogan has any morality, then the negro physician is done a grave injustice in being denied the opportunity of practicing in the negro division of Grady hospital.

The only reason for excluding negroes seems to be a result of adhering to tradition. It is a serious reflection upon the cultural advancement of the two groups to imply that negro physicians and white physicians could not work together harmoniously on an interracial medical staff; when in the same community negro and white plasterers, negro and white brickmasons, and many other less educated groups work without the slightest friction or misunderstanding. Surely there must be in the community a sufficient number of physicians of the white race who would recognize the gravity of this injustice and out of whose bigness of heart and sense of equity and fair dealing this age-old custom will be abantloned, and negro physicians will be given their rightful share of consideration as taxpayers and competent practitioners.

In the interest of improving negro health and widening the health zone of the negro population of Atlanta, it would be a desirable thing for the Atlanta University System to add to its magnificently scheduled program of development a hospital for the training of negro nurses and internes in the city of Atlanta. Since negro physicians are denied the opportunity of practicing in Grady hospital and of sharing in the clinical experiences, the university system would make an inestimable contribution to the health status of negroes by establishing the type of hospital above mentioned.

Just as the negro had to depend upon philanthropy and his own limited resources to pay for his high school education in Atlanta for a half century, he may yet turn to philanthropy to provide for him a normal opportunity for training and receiving the benefit from discovery and advancement in medicine from year to year.

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The Eva Jessye choir, which is composed of artists of radio and concert stage, an outstanding negro operatic ensemble of the world, unsurpassed in native interpretation, will appear at Wheat Street Baptist church at 3:30 o'clock this afternoon.

Savannah, Ga., Progress
June 20, 1935

### CONGRATULATIONS

The people of this section of Georgia extend sincere congratulations to the city of Douglas on the completion and formal opening of its city-owned hospital.

A bond issue of $30,000 was passed by the citizens of Douglas to make this hospital possible.

The new hospital has six private rooms, four white ward rooms, and a Negro division.

More than $12,000 was spent on the hospital equipment, including an emergency room, an X-Ray department, an operating room, a sterlizing department, kitchen, dining rooms and nurses' quarters.

The operation of a hospital in a city is a real asset to the citizens. Often in emergency cases, time is valuable. The citizens of Douglas are now in immediate reach of hospital facilities. The hospital means that the doctors of Douglas will be able to give more comprehensive service.

Best of all, the operation of a hospital in Douglas means for the citizens a saving of lives, a lengthening of lives, and the placing of greater pleasure in lives through maintained health. — Waycross Journal-Herald.

Dalton, Ga., N. Ga. Citizen
October 24, 1935

### Negro Hospital Needed

"Something Ought to Be Done' about a negro hospital in Dalton It seems impracticable to take care of them at Hamilton Memorial, and there is no room on the hospital property to build a ward for colored people. But some arrangement should be made to take care of emergency colored cases.

It has been suggested that if the city moves the fire department into the new city hall building, the old fire hall, with the council chamber and bedrooms upstairs, could easily be converted into a negro hospital—in fact, the building would be almost ideal for this purpose. An emergency room could be built downstairs, leaving the fire truck driveway and garage for an ambulance entrance. The upstairs could be changed into a colored ward, with quarters for a colored nurse and orderly, and several rooms for patients. Being near the Hamilton Memorial hospital would make it convenient for the doctors.

We understand that if the city operated the colored hospital, federal aid would be available for necessary alterations to the building —but federal aid will not be granted if it is a private institution. We believe help could also be obtained from the Julius Rosenwald fund which is administered for the advancement of colored people.

The city jail could still be built behind the old fire hall building, as contemplated.

Hospitals - 1935

Mississippi.

Biloxi, Miss., Herald
August 20, 1935

# Approve Pinehill As Hospital For Negro Veterans

According to advices received here today, the executive committee of the American Legion, Department of Mississippi, at a meeting held in Jackson on August 17, gave its approval to a resolution referred to the committee from the Tupelo convention recommending the establishment on the Mississippi Coast of a hospital for the exclusive care and treatment of colored veterans.

The resolution, orginating in Joe Graham Post and first presented at the convention at Tupelo in June, has now received the final approval of department officials and will be presented to the national convention of the American Legion at St. Louis in September.

# Launch Drive For Hospital Annex

11-2-35

YAZOO CITY, Miss., Nov. 1—Plans are in progress here to collect funds to construct a $5,000 annex to the Afro-American hospital, located at Webster and Eighth street. The Afro-American Sons and Daughters, fraternal insurance order, is sponsoring the drive.

Hospitals—1935

Missouri.

# NEGRO DOCTORS SEEK COMMAND OF NEW HOSPITAL

## St. Louis Group Sets $3,000,000 Plant As Objective

2-2-35

ST. LOUIS, Mo. (ANP)—A program for physicians of our race, here, who possess real ability, to have charge of the new $3,000,000 Homer G. Phillips hospital, was urged by [illegible]. Cheatham, recently elected president of the Mound City Medical Association, and chief of the staff of gynecology of City Hospital No. 2, in an address at an installation dinner given by members of the Medical Forum at Poro College last week. Partisan politics was denounced.

Advocating race solidarity and the unification of local professional groups among the physicians, in that they may work toward common goals and profit by each other's experiences, Dr. Cheatham said.

### Urges Unity

"Of the many questions important vital to the future economic and professional welfare of the Negro doctor in St. Louis, none is more imperative than his permanent and rightful status in connection with the new Homer G. Phillips Hospital, a bond issue project, which our voters approved with their ballots during a city election some years ago.

"We should see to it that an independent unit of qualified physicians of our group are permanently entrenched at that institution, and who could work harmoniously with whatever school unit whose term it is to serve."

He explained, "Such plan should not be influenced or worked out by self-appointed 'political grafters' or emissaries; but through a committee of the Mound City Medical Forum, and in conference with the Hospital Commissioner and whomsoever else he desires."

He proposed a combination of influence between the physicians and pharmacists, working together toward common ends, especially with regard to bringing pressure to bear on conditions affecting either or both professions.

It was Dr. Cheatham's opinion that the present Democratic administration had given the Mound City Medical Forum, as an organization, more consideration-with plenty of room for improvement-than any previous administrations during his stay of more than a quarter of a century in St. Louis.

# HOSPITAL IN ST. LOUIS IS REORGANIZED

## Negro Doctors Will Have Full Control as They Qualify

Cuts

2-7-35

ST. LOUIS.—A fight for more than 10 years to have Negro doctors take control of the administration of the City Hospital No. 2 was pushed ahead Friday night, December 20, when the reorganization of the staff at the Homer G. Phillips Hospital for Colored and at City No. 2 was formally announced by Dr. Ralph L. Thompson, hospital commissioner.

This is in keeping with the idea that when the new $2,500,000 Homer G. Phillips hospital will be opened in July, 1936, the administration of the hospital will eventually be in the hands of Negro physicians who will have complete medical responsibility, according to Dr. Thompson.

### Doctors Endorse Plan

The plan was developed by the Rev. Alphonse M. Schwitalla, dean of the St. Louis School of Medicine at St. Louis university and the faculty of the school with the endorsement of the Mound City Medical forum, composed of Negro doctors in and around St. Louis.

Until Negro physicians are trained to assume the chief positions in the several medical departments of the hospital, these positions will be filled alternately by members of the faculties of the medical school of both St. Louis and Washington universities, St. Louis university teachers will take the first two-year period of administration.

At the present time Negro physicians have little responsibility for medical administration at City hospital No. 2.

### To Take Full Control

Dr. Thompson said that Negro doctors would be able to assume complete responsibility within a few years in medicine surgery obstetrics and gynecology.

More time would be needed, he said, in more specialized fields such as neurology, pediatrics and orthopedics.

The staff and internes of the hospital together with faculty members from St. Louis university, city officials and other citizens met in the dining room of the City hospital No. 2.

Joseph M. Darst, director of public welfare, was master of ceremonies.

Explanation of the staff organization was given by both Dr. Thompson and the Rev. Mr. Schwitalla.

### Dr. Thompkins Talks

Dr. William J. Thompkins, recorder of deeds for the District of Columbia and former superintendent of General hospital No. 2 in Kansas City, was present at the meeting and spoke in the place of Mayor Bernard F. Dickmann who was unable to attend the meeting.

Dr. Thompkins congratulated St. Louis on the forward step being made and told the doctors to prepare themselves diligently to take over the responsibilities that would come in the new hospital departments.

In the new set-up Dr. John W. Stewart, assistant professor of surgery in the St. Louis university school of medicine, will be chief of staff for Phillips hospital. His assistant will be Dr. Wallace B. Christian. Dr. Oral S. McClellan, present superintendent, and Dr. Henry E. Hampton, medical supervisor, will retain their respective positions.

Under the new set-up each department in the hospital is headed by a director who has complete control of the activities on that service. This position is filled by a white physician who is a member of the St. Louis university school of medicine at this time.

The associate director who is likewise a white physician and a member of the St. Louis university school of medicine is second in charge of this service and is responsible to the director. The assistant director is a Negro physician in each case. He is responsible to the associate director for his conduct of the service. The assistant director visits the institution daily, if necessary. He diagnosis, prescribes and disposes of every case under his supervision. The director and associate director are at his disposal for consultation suggestions or help in any manner to properly treat a case.

Other members of the service work with the assistant director. These men rotate on their service. The same general scheme is followed on each division of the hospital.

On services that could not be filled by Negro physicians who had not specialized in that particular work, those places are now filled by white physicians. The fundamental principles of staff organization will permit these places to be filled whenever competent individuals in that particular line are developed.

Hostesses who served refreshments were, Mrs. Minnie Dames, Mrs. Esther Mayo Sherard, Mrs. Mary B. Dyer, P. Ruby Perdeau, Miss Mabel Northcross, Miss Mary Martin, Miss Huldah McCarthy, Mrs. Juanita B. Halley and Mrs. Talitha Helmkemp.

The complete staff is as follows:

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# Negro Physicians Get Advancement In Hospital Service

Angus

## Doctors Christian, Hampton And McClellan Appointed On Executive Board

12-27-35

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This staff is to have charge of the new Homer G. Phillips Hospital, which is expected to be finished early next summer. In making his announcement Thompson stated that he made stated that owing to the fact that the appointments upon the nomination and recommendation of the St. Louis University School of Medicine and the Medical City Medical Forum, the latter being composed of Negro physicians St. Louis.

This meeting was presided over by Honorable Joseph Darst, Director of Public Welfare, who said, "has other things in mind. St. Louis University announced in the which will include the new organization and thanked at Koch Hospital his associates and the representatives of the Mound City Medical and provisions for the able assistance they psychopathic department at City Hospital No. 1, organization. He also commended the members of the Mound City Medical Forum for their cooperation and self effacement.

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Hospitals—1935

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Dr. Director of Public Welfare, who said. The Mayor, Rev. Schwitalla, dean of the Medical that direction. "has other things in mind. St. Louis University said. "has other things in mind. St. Louis University which will be announced in the School expressed his confidence in near future, which will include the new organization and thanked a new building at Koch Hospital his associates and the represen- for the care of the tatives of the Mound City Medical building for the provisions for Forum for the able assistance they feeble minded and had rendered in forming the new patients in the psychopathic promises of the commended Medical Forum, the latter organization. He also being the pre-election of the Mound City composed of Negro physicians of mayor to give the colored physi- the members of the cians greater opportunity in ser- Medical Forum for their coopera- St. Louis. vice in the city tion and self effacement. This meeting was presided over by Honorable Joseph Darst, Di- people in the city rector of Public Welfare. Alphonse Schwitalla, Rev. Father

While it is noticeable in the plan of the new organization that no Negro physician heads a department, it is understood that the greater part of the responsibility of running the hospital will rest upon them and promotion will be made with experience and efficiency.

Other speakers on the program were Dr. John W. Stewart, Chief of Staff, Dr. W. B. Christian, Assistant Chief of Staff, Dr. Oral S. McClellan, Superintendent of City Hospital No. 2; Dr. Wm. J. Thompkins, Recorder of Deeds Washington, D. C., and Mr. Frank L. Williams, principal of Vashon High School, pioneer leader of movement for new hospital for Negroes in St Louis.

The running of the hospital will be in the hands of the Medical Executive Board. This board will have charge of the operation of the hospital from what is called from "top to bottom," and is composed of three colored and four whites as follows:

Dr. John W. Stewart, Chief of Staff; Dr. W. B. Christian, Assistant Chief of Staff; Dr. Oral S. McClellan, Superintendent; Dr. Henry E. Hampton, Medical Supervisor; Dr. Joseph Grindon, Director of Dermatology (Instead of the Director of Surgery); Dr. Daniel Sexton, Director of Medicine; Dr. Percy H. Swahlen, Director of Gynecology and Obstetrics.

### Chief-of Staff
Dr. John W. Stewart

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Dr. W. B. Christian

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Hospital - 1935

National Negro Hospital Fund.

Modern Hospital
Chicago, Ill

## Negro National Hospital Fund

Sirs:

I have just returned from a 4,000 mile trip through six states of the South in the interest of the Negro National Hospital Fund. . . .

I must hasten to advise you that no funds have as yet been raised for the Negro National Hospital Fund. The campaign for funds has not yet been launched. I have for the past two years been laying the foundation for the launching of the nationwide campaign in the near future. Nor have we yet elected a treasurer or president. All this will take place within a few weeks.

As for the question of segregation, anybody who raises that question does so without a knowledge of the condition that prevails throughout this country in connection with Negro patients, physicians and nurses and their status in the public and private hospitals of the United States or he does so insincerely, with an aim to defeat the program of the Negro National Hospital Fund.

My plan has as its purpose a manly attempt of 12,000,000 black Americans, who are social outcasts, economic pariahs and political nonentities, to throw off this status of virtual slavery and redeem ourselves by our own efforts with our own pennies.

I have made a complete survey of every municipal, county and state hospital in forty-two states and . . . found . . . that the Negro physician has absolutely no chance in any of the public hospitals of the United States. In fact, I have found only one public hospital in America, apart from the two Negro tax supported hospitals in Missouri (one at St. Louis and another at Kansas City) in which a Negro physician may practice surgery. That one is the Harlem Hospital in New York City. The Negro physician and nurse . . . are virtual outcasts from the hospital system of America.

What then should we do? Should we sit down and fold our arms and remain outcasts for ever and allow our sick to continue to die like flies for lack of hospital care and allow our trained men and women to go without opportunities for professional, social and cultural leadership?

The only solution of this problem of adequate hospitalization for the Negro race in America and proper training of Negro physicians, nurses and social workers is for the Negro race to take the initiative in founding its own institutions and provide for itself its own development. . . .

I have discussed this plan with the leaders of America, in every walk of life, with governors, mayors, college presidents, deans of medical schools, bankers, big business men, hospital executives, social leaders and publishers. . . . They all agree with me that my plan is the only way out and they have given their written endorsements to it and have allowed their names to be used as backers of the plan.

The truth of the matter is that the white man will not mix with the Negro. He will help him to get his own institutions, but he is not going to share his with him, so the only thing to do is to face the facts as they really are and face them with a simple practical program.

(Rev.) Amos. H. Carnegie,
Executive Secretary.

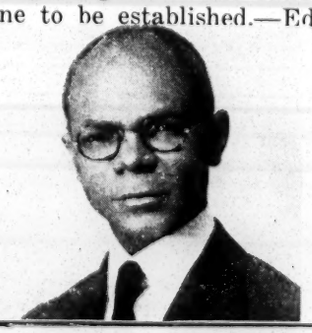
Negro National Hospital Fund,
New York City.

The plan of the Negro National Hospital fund to raise $150,000,000 for the construction of Negro hospitals is based on the hope that each of the 12,000,000 Negroes in the United States will donate one cent each week to the Fund. (The Modern Hospital, April, 1934.) The aim is given as "a standard hospital for the Negro race in every city of the nation where there are 10,000 or more Negroes."

While all students of social welfare will readily agree that the present provision of medical and hospital care for Negroes is inadequate and that opportunities are lacking for the needed clinical training and the practice of their profession by Negro doctors, dentists and nurses, there is question in the minds of some about two aspects of the program of the fund. First, is it desirable from the standpoint of the patients that separate hospitals be established for Negroes and that these be manned largely or entirely by Negro physicians and nurses? Second, does the plan proposed by Mr. Carnegie have enough chance of success to merit support and effort by those who wish to help the Negro race?

Since the above letter was written the board of trustees have adopted a constitution, elected officers and officially launched the nationwide campaign for funds. George E. Wibecan is president, Dr. Walter Merrick, vice-president, C. C. Huitt, president of the Dunbar National Bank, treasurer, and Charles H. Woode, recording secretary. Mr. Carnegie is executive secretary.

While The Modern Hospital is entirely sympathetic with efforts to provide better hospitalization for any uncared-for group of citizens, white or colored, it does not wish to endorse the Negro National Hospital Fund until such time as it has been demonstrated that the plan is sound and practical and that the money collected will be scrupulously handled and a public accounting made therefor. The constitution of the fund requires quarterly or semi-annual audits by a certified public accountant and publication of all gifts to the fund in a magazine to be established.—Ed.



Hospitals-1935.

New Jersey

# Dr. John A. Kenney Gives Private Hospital, Valued At $100,000 To Negroes of Newark as Xmas Present

NEWARK, N. J.—The finest example of magnanimity in the history of this state was made by a colored physician to the colored citizens of this city and vicinity on Christmas Eve when Dr. John A. Kenney, former personal physician to the late Booker T. Washington, turned over his private hospital to a committe of citizens as a public institution around which it is hoped will be built the largest Negro-owned hopital in the North.

The hospital property is valued at almost $100,000 and Dr. Kenney's personal investment in the institution which he has built up in the past ten years is said to have been $68,000.

For the past year, Dr. Kenney had sought to get various factions united behind the Kenney Memorial Hospital so that it might be enlarged into a great hospital for Negroes of Northern New Jersey, but factional strife kept the various groups apart until the matter reached a climax Christmas Eve.

With carefully laid plans which he had kept secret he called a meeting of the two opposing hospital committees at the hospital and with the following address, which will become memorable, offered his hospital to his people as a Christmas gift—

"In the spirit of this Christmas season and the Christ-like peace and harmony which should pervade the world at this time, Mrs. Kenney, our children and I consider it one of the highest privileges of our lives to offer to our group of the North Jersey area this property as a Christmas gift. By this means we hope to make a lasting contribution to our racial uplift to our city, to our country and to God.

"With this offer to the entire North Jersey community, we hold out the olive branch with an invitation to all factions, groups and individuals to unite under it and together let us in the interest of the health and the betterment of our people, give to this section a hospital equal to its needs and second to none.

**Urges Unity**

"I hold in my hand the Bible once used by the great and lamented Booker T. Washington, and autographed by him. Many a time in my professional ministrations to him have I found him with this Bible in his hand. From it he got inspiration and strength, and courage to do the great work which he left behind him. From Booker T. Washington's Bible I now read and commend to you the immortal words of the Apostle Paul to the Phillipians (chapter 3, verses 13-14): Brethren, I count not myself to have apprehended; but this one thing I do, forgetting those things which are behind, and reaching forth unto those things which are before, I press toward the mark for the prize of the high calling of God in Christ Jesus.

"Particularly do I emphasize to you 'Forgetting those things which are behind.'

"And now may the Spirit of Peace which has directed me in reaching this conclusion, and has guided me and mine through sacrifices, privations and hardships unknown to most of you, guide you in reaching your conclusion as to your acceptance or rejection of this offer, whichever to you seems best."

Leading up to this climax Dr. Kenney called attention to the fight which for ten years he has waged for a hospital for his people in this area, and deplored the facts that by reason of factionalism and strife his ideal has been made impossible as conditions now stand. He pointed out that the community had formally accepted his hospital last August for the sum of $77,600, that on November 14, the original Ways and Means Committee had offered him $40,000, and that subsequently the new Committee of Twenty-five had offered $70,000, but that he now declined all offers in the interest of harmony and solidarity in the community, offered to donate the hospital instead of selling it.

The large group of citizens assembled, taken my surprise, were overcome by this, stunning act of benevolence, and Dr. and Mrs. Kenney were the recipients of evident heartfelt appreciation on the part of those present.

## Dr. John A. Kenney

Big men do big things—and John A. Kenney has been a big man for a long time. It was this same sincere John A. Kenney who made such a ruckus in a Southern city that it was deemed best that he leave that place because he believed in a principle and believed in is race. He left under protest. He was influenced by friends to do so.

This same man was responsible to a great extent to the clinics that are held at Meharry Hospital every year, where the greatest authorities in the medical field have lectured.

He was one of the pioneers in the fight for a Negro personnel at the Veterans' Hospital at Tuskegee, and it was this same John A. Kenney who so ably edited the "Journal of the National Medical Association" for a number of years. It was during his editorial regime that he encouraged the young medics of the race to a greater faith in themselves.

Now to cap an outstanding career he has given to the city of Newark, N. J., a hospital that he built with his own money, and which today is valued at $93,,000. He declined $70,000 for the hospital, preferring to give it to the community as a gift.

Like all big and *sincere* Negroes, great will be the name of John A. Kenney—after he is dead.

# Former Kenny Memorial Hospital In Newark Now Named The Community Hospital; Dr. L. Greely Brown Head

NEWARK, N. J.—The Community Hospital, began work Friday morning, uder a full staff of physicians, surgeons and dentists. Since Jan. 1st the institution has been running under auspices of the Booker T. Washington Community Hospital Association and the work has already increased greatly.

Following an invitation sent out by Dr. John A. Kenney, the medical director, forty Negro physicians pledged their support. On February 20, twenty-two of these met at the hospital and organized the professional staff. Already there was a consulting staff of twenty physicians and surgeons, nearly all of whom are specialists in their lines.

President of Medical Board, Dr. L. Greely Brown of Elizabeth; secretary, Dr. A. A. Phillips of Newark.

The professional work is now conducted under ten different services.

1. General Medicine. Chief of service, L. G. Brown, M. D.; Associates, A. C. Thornhill, M. D. and W. Harold Branch, M. D.
2. Surgery and Gynecology. Co-Chiefs of Service, John A. Kenney, M. D., Sc. D.; Euclid Ghee, M D.
3. Obstetrics, Chief, Lena Edwards, M D.
4. Urology. Chief, C. R. O'Crowley, M. D.
5. Ear, Nose and Throat. Chief, Dr. C M. Harris, Jersey City.
6. Pediatrics, Chief, Dr. Gibbs Chisolm, Newark.
7. Ophthalmology, (Diseases of the Eye) Dr. A. O. Lynch, Chief, Montclair.
8. Anesthesia, Chief, Dr. A. Maurice Curtis, Paterson.
9. Psychiatry. Chief, Dr. Henry A. Davidson, Newark
10. Dentistry, Co-Chiefs, Dr. W. S. Wiley, East Orange and Dr. R. H. Thompson, Westfield.

Hospitals - 1935

New Jersey

# Supt. of Nurses at N. J. Hospital Asked to Resign

Afro-American

## Miss Gertrude Scott, Let Out Thursday, Only Recently Appointed.

Baltimore Md.

## COULDN'T AGREE WITH DR. KENNEY

### Nurses Had Refused to Do Laundry.

NEWARK, N.J. (UNP)—Dr. John A. Kenney, medical director of the Booker T. Washington Memorial Hospital, asked his new superintendent of nurses, Miss Gertrude Scott for her resignation Thursday.

She has been at the hospital only a few weeks and succeeded Mrs. Hawthorne Aida who resigned two months ago after she reported for duty fifteen minutes late one morning.

Dr. Kenney wrote: "You do not impress us that your attitude is not producing an unfavorable influence upon other workers."

**Impossible to Work Under**

Miss Scott who is a graduate of Mercy Hospital, Philadelphia, said it was "impossible to work under Dr. Kenney."

An argument over washing hospital linen brought on the breach. Nurses who are paid $40 a month at the hospital refused to do such washing on professional grounds. The hospital is said to be without a laundress temporarily.

The Booker T. Washington Hospital was formerly the Kenney Memorial Hospital. Dr. Kenney gave his private hospital to the Booker T. Washington group as a Christmas present with the provision that the ministerial group, then headed by the Rev. H. T. Borders, assume a $25,000 building and loan mortgage.

The ministerial association formerly supported the North Jersey Hospital Association.

It was reported recently that the North Jersey Medical Association had endorsed the Booker T. Washington Hospital. Dr. J. E. Stuart, secretary recently declared that a letter of endorsement, supposed to have been signed by him, was a fake. Dr. Kenney declined to make a statement.

Hospitals - 1935

New York.

# MIXED STAFF ON N.Y. HOSPITAL

DOCTORS WIN IN STRONG FIGHT

NEW YORK—Colored physicians will be included on the regular staff of the newly erected Queens General Hospital, Colored internes and other medical workers will be admitted on an equality with other racial elements, according to an announcement last week by Borough President George U. Harvey. 3-2-35

President Harvey's statement was far from voluntary. It was not the free and frank expression made in a brotherly spirit for fair and square dealing. The agreement to appoint Colored medical men was obtained as other race rights and opportunities are won—by a determined and well organized protest of aroused citizens.

The Queens Committee for Equal Opportunity led the fight. It is composed of representatives from Socialist Party locals, churches, fraternal organizations, Communist Party, League of Struggle, N. A. A. C. P. local branches and other associations.

President Harvey's announcement followed a visit by a delegation from the Queens committee. Members of the committee had declared their intention to force Harvey to keep his promise to appoint Colored staff members; and also that it would broaden its activitie s to include militant struggle for theabolition of all discrimination against Colored people here.

# 5 GET QUEENS HOSPITAL JOBS IN BIAS FIGHT

## Goldwater Admits Old Department Ban on Negro Medicos

4-20-35

The way was seen clear today for the appointment of Negro physicians to the staffs of public hospitals in all parts of the city as the result of the naming of five Negroes by the medical board of the Queens General Hospital for an appointment to the new hospital in Flushing, Hillcrest. The hospital will open in the Fall.

Commissioner of Hospitals S. S. Goldwater, who made official announcement Thursday of the 203 names on the junior, or visiting staff, of the new hospital, revealed that the following Negro doctors had been appointed to posts:

Dr. John Edward Loury, Flushing, assistant attending physician.

Dr. Judge Thompson, Jamaica, clinical assistant, attending surgeon.

Dr. Sterling O. Fields, Jamaica, clinical assistant, attending oto-laryngologist.

Dr. Charles Reid, Jamaica, assistant attending physician, and

Dr. Forrest Hayes, Corona, clinical assistant, attending physician.

"In appointing colored physicians to the Queens General Hospital," said Dr. Goldwater, in announcing receipt of the recommendations, "the Department of Hospitals is making a new departure, such appointments in the past having been confined to Harlem Hospital."

**Bias Admitted.**

The characterization by Commissioner Goldwater of the naming of Negroes to hospital appointment outside of Harlem as "a new departure" was hailed by leaders of the fight against segregation as an official admission that race discrimination has existed up to now.

Mrs. Geraldine Chaney, chairman of the Committee for Equal Opportunities, which brought to a successful conclusion the fight to open the new city hospital to Negro doctors said yesterday that the Department of Hospitals could no longer exclude Negroes from the staffs of other city institutions without laying itself open to charges of inconsistency in its 'new departure."

The Queens hospital campaign for Negro staff members was started more than two years ago, when Dr. J. G. William Greef was Tammany hospitals commissioner, but had worked itself into a stalemate which was broken last October when the Committee for Equal Opportunities was organized by delegates from 85 civic, church, political and fraternal groups, Negro and white, and a militant fight was undertaken, including mass meetings, delegations to City Hall, the Municipal Building and Borough Hall, the granting of appeals in changes, and a bombardment of messages and resolutions upon Commissioner Goldwater and Mayor LaGuardia.

Victory mass meetings will be held Monday night in Allen A. M. E. Church, Jamaica, and on Wednesday in Ebenezer Baptist Church, Flushing, to celebrate the naming of the Negro doctors.

Commissioner Goldwater's statement was accompanied the announcement that the Medical Board had made its nominations made mention of the campaign waged for inclusion of Negroes on the staff. The Commissioner said:

"Numerous civic organizations in Queens have urged that recognition be given to the colored physicians of the borough in the selection of the Queens General Hospital staff. Among the nominees are five colored physicians, three assigned to the division of medicine, one to surgery and one to oto-laryngology."

The senior staff of 28 department chiefs and heads of clinics, announced several weeks ago, does not include any Negroes. It is understood that several Negroes will be named to the dental staff and in some of the non-professional positions which are still to be filled in the hospital.

**Hails Fight.**

"I do not believe the Negro physicians would have been named to the new hospital if it were not for our fight," Mrs. Chaney said. "Another barrier has now been broken. Commissioner Goldwater admits that discrimination has existed up to now in the Department. He should be consistent and admit Negroes to the staffs of other city hospitals from now on."

Frank Martell, white, chairman of the action committee of the Committee for Equal Opportunities, saw in Commissioner Goldwater's statement a complete vindication of all the means used by the committee to arouse mass sentiment in the fight against discrimination.

"Of vastly more importance than the placing of five doctors on a hospital staff, he said, is the fact that we have won recognition of principle that there is discrimination in the city administration and that active campaiging is the only way to overcome it."

Both Mrs. Chaney and Martell expressed complete satisfaction with the number of Negroes nominated for appointment, five out of a junior staff of 203.

**Daily Comments.**

Commenting editorially on the Goldwater announcement, the Long Island Daily Star said, in part:

"It is a pleasure to note that the race-discrimination issue appears to have been eliminated in the selection of physicians for the staff of the new Queensboro General Hospital."

Regarding the number of Negroes nominated, the editorial had this to say: "This is a little under 2½ per cent of the number of physicians recommended, and since the Negro population of Queens is slightly under 1¾ per cent of the population of the borough, Negro representation appears to be in full proportion to the race's claims.

"Medicine, of course, is neither white nor black. There is no more medicine than there is Negro astronomy or Negro mathematics . . . . But a racial question, nevertheless, may be involved legitimately. It is the question of opportunity. Hospital training is absolutely necessary for a young doctor. The denial of that opportunity to competent Negro physicians would place them under undeserved handicaps professionscence after receiving two invitations to attend.

**"Hurtful Attitude" Charged.**

"The condition in Harlem Hospital will not remedy itself," Dr. Roberts asserted. "As head of the hospitals of the City of New York, he, of all men, should come forward and attempt to help a situation that is evidently bad. His whole attitude is hurtful rather than helpful."

Explaining that his inquiry was "from a layman's point of view," Mr. Boyce repotred a bed capacity of 325 at Harlem Hospital, whose average number of patients was 450. He said this overcrowding led to overworking of the medical and nursing staff.

So crowded weer most of the hospital's wards, Mr. Boyce found, that the corridors were used as a place to store patients on cots, stretchers and sometimes chairs.

Testifying as to the "bad condition" of the hospital's refrigerating system, Mr. Boyce told of a refrigerator, used to store serums at a proper temperature, which "has been out of order for a year or more, necessitating a make-shift system of ice." He said the general kitchen, doing most of the hospital's cooking, was "dirty."

**Found Small Linen Supply.**

The investigator asserted there was "a general lack of towels and linen supply in the hospital" and that mattresses were not sterilized.

Of the five ambulances in the hospital, Mr. Boyce said that three used for general service were obsolete 1927 models, but that two others, used to transfer patients, were 1932 models and in good condition. He asserted that on the average patients sent to other institutions had to wait four or five hours for the transfer ambulance, which loaded them in "six or seven at a time."

He testified that the fire hose in the hallways of the hospital had not been inspected since 1931 and that during his six-weeks' investigation there he had not witnessed a fire drill.

Mr. Boyce's testimony was corroborated by Dr. Ralph H. Young, a Negro, who is an associate surgeon at the hospital.

He told the committee the nurses were overworked and that 14½ per cent of them were tubercular owing to the large number of patients, inadequate living quarters and insufficient food. Instead of four patients at a time, as recommended in a Hospital Department survey in 1932, the average number of cases given a nurse at the hospital was 10 "while the lowest is about 8 and the maximum as high as 15," Dr. Young charged.

The surgeon also said there was no emergency ward in the hospital and that such cases were taken directly to the general ward.

# HARLEM HOSPITAL FOUND A 'DISGRACE'

## Investigator Tells Committee Refrigeration and Fire Apparatus Are Useless.

## STAFF HELD OVERWORKED

### Seventh of Nurses Tubercular, Surgeon Says—Goldwater, Not at Hearing, Scored.

The subcommittee on health and sanitation of the Mayor's commission on conditions in Harlem, at a hearing yesterday afternoon, heard Albert M. Boyce, special investigator for the commission, tell of "the disgraceful inefficiency" of the physical equipment of the Harlem Hospital, a city institution.

Mr. Boyce, after a six-weeks' investigation of the hospital, reported that the institution was greatly overcrowded, that the medical and nursing staff was overworked, that the refrigeration and fire equipment was "practically worthless," that the ambulance service was obsolete and that the general discipline and supervision of the hospital was "poor."

At the opening of the hearing, held in the Seventh District Municipal Court, 447 West 151st Street, Dr. Charles H. Roberts, chairman of the subcommittee and also head of the entire commission, severely criticized Dr. S. S. Goldwater, Commissioner of Hospitals, for his ab-

**Says "Pull" Fixes Promotion.**

Asked by Dr. Roberts about a system of promotion at the hospital, Dr. Young declared: "It all depends who is behind you and the pull you have with those in power. Seniority counts for nothing."

Asked if he expected reprisals because of his testimony before the committee Dr. Young said: "Yes, I expect to get fired for it."

A hearing of the subcommittee on discrimination in employment will be held Tuesday at 3 P. M. at the same hour.

The charge that a home-relief investigator had taken a woman relief client to a house of ill repute, made by Merrill C. Work, a witness before the Mayor's Commission on Conditions in Harlem, has been found groundless by District Attorney William C. Dodge, it was announced yesterday by Oswald W. Knauth, director of the Emergency Relief Bureau. Mr. Knauth said the District Attorney had sent him a copy of an affidavit by the relief client showing that the supposed house of ill fame was a refuge for unfortunate women.

## *Equal Opportunities*

IT IS GRATIFYING to learn that Borough President George U. Harvey of Queens is certain that Negro doctors and laymen will have representation on the staff of the new Queensboro General Hospital. Over a period of months the Committee for Equal Opportunities has been waging a fight for fair consideration of all citizens in municipal hospitals. Earlier in the battle they met rebuffs from Mayor LaGuardia and Dr. S. S. Goldwater, commissioner of hospitals.

Since that time Dr. Goldwater has accorded more recognition to Negro doctors in Harlem Hospital, has placed Negro clerks in his office for "front," and has indicated that he would yield to the clamor for equal opportunity in Queens. The good commissioner, however, desires to display no evidence of backing down before mass protest. He wants to retain his "face." We believe that New York City is liberal enough to permit the administration to play square with all its citizens. Whether we are right or wrong, Mr. LaGuardia and his officials may expect an uncompromising fight if they continue to hand over numerous jobs and responsibilities without including Negroes.

**New York Evening Post**

JON 3 1935

## HARLEM'S HOSPITAL

Just a few of the complaints made against Harlem Hospital before the health and sanitation subcommittee of the Mayor's commission on conditions in Harlem:

**"Jim Crowism" is methodically practiced.**

**Ninety per cent of the patients are Negroes, but there are only six Negro internes to twenty-one whites; only two Negroes on the medical board to nine whites.**

**The hospital has been consistently starved by the city administration, to the point where—**

**Fourteen per cent of the nurses are tubercular, because of overwork, poor living conditions and insufficient food;**

**Though the Hospital Department recommends a case load of four to a nurse, the Harlem average is ten, and individual nurses often have fifteen patients;**

**Refrigeration and fire equipment are practically "worthless";**

**Three of the five ambulances are 1927 models, obsolete and in junk condition;**

**The general kitchen is unsanitary;**

**Serum must be stored in a makeshift ice chest;**

**Fire drills are unheard of;**

**There is only one emergency operating room open at night, and patients desperately in need of treatment have to wait for five to six hours;**

**Nurses are not given the full courses prescribed by the State, but the State prefers to license them anyway, instead of investigating conditions.**

It is highly important that these findings—mostly official reports by the commission's own special investigator—be brought to Mayor La Guardia's attention for prompt action, if the "better feeling" the Mayor seeks in Harlem is to be created.

**But so far the commission has not even found it possible to induce Mayor LaGuardia's Commissioner of Hospitals, Dr. Goldwater, to attend its most important sessions.**

Eleven clinics, whose schedules range from daily to twice a week, will be provided for the sick and poor of Queens and began Wednesday at the hospital.

The clinics are held in the outpatient department, under the supervision of the hospital's staff physicians, every day except Saturday afternoon and Sunday.

With one exception all morning clinics will open at 10 a.m. and continue until noon. Registration of patients for these sessions will run from 9 to 10:30 a.m. Afternoon sessions will be from 2 to 4 p.m., with registration from 1 to 2:30 p.m.

Only those in actual need will be admitted to the clinics. Those financially able to obtain the services of a private physician will not be admitted. Investigators will be on hand at the outpatient department to check up on the registration data of all patients, to see that no "chiseling" on the part of the moderately well-to-do is permitted.

The entrance to the clinic is on 164th street.

# LARGE CROWD HEARS MAYOR

## Ten-Story Structure Cost $3,500,000

The new Queens General Hospital at Jamaica was dedicated last Wednesday by Mayor LaGuardia, who delivered the principal address before 1,500 persons. Two thousand were huddled outside, unable to get into the jammed floor where the exercises were held.

The 10-story structure, built at a cost of more than $3,500,000, will be opened to patients next Friday, Nov. 15. A skeleton staff of 85 already has been chosen, among them five Negro physicians and two nurses.

The physicians include Drs. Charles M. Reid, Sterling O. Fields and Judge A. Thompson from Jamaica, and John Lowry and Forrest Hayes from Flushing. The nurses are the Misses Ruth M. Lee and Ruth L. Webster.

Dr. S. S. Goldwater, hospitals commissioner, has appointed Dr. Marcus D. Kogel, formerly of Cumberland Street Hospital in Brooklyn, to head the institution. The nine buildings on the grounds include the hospital itself, the staff house, the nurses' home, employees' building, mortuary building, industrial building garage, power house and laundry.

## HEADS SANITARIUM

Dr. CONRAD I. EDWARDS, President of the Edgecombe Sanitarium Corporation, Edgecombe Avenue at 137th Street, which has been "the Good Samaritan" not only to Harlem's health, but to the proficiency of Harlem's doctors for the past decade.

Hospitals - 1935

North Carolina

[illegible] Times
November 29, 1935

**HEALTH SERVICE FOR NEGROES AN EXPERIMENT OF PROMISE**

A "North Carolina First" of real significance may result from the establishment of a Negro Health Service under the direction of the State Board of Health, the initial expense to be borne by the Julius Rosenwald Fund.

In every Southern State the problem of public health among the people as a whole is complicated by the presence of the negro, the natural slowness of the race to avail itself of safeguards, faulty sanitation, and the like.

While it is true that the health of the negro is as much a matter of concern to a health department as that of the people as a whole, there is a lack of cooperation growing out of lack of education and faulty environment. A health service designed to study negro conditions in particular is a major aid to the effectiveness of a health service dealing with the State at large.

[illegible] N. C., News
December 3, 1935

## CONTRACTS LET FOR HOSPITAL IN WAYNE

**State Negro Insane Hospital At Goldsboro to Get Buildings Costing $221,938.**

Raleigh, Dec. 2.—(AP)—Contracts calling for the construction of three new buildings for the state hospital for the negro insane at Goldsboro at a cost of $221,938 were let here today by the building committee and officers of the institution.

The federal government is providing $109,636 of the money necessary for the construction and something like $135,000 in state funds will be available.

T. A. Loving and company, of Goldsboro, was awarded the general contract at $193,950; plumbing for the building for the male insane will be installed by T. L. Blow, of Goldsboro, at $3,700 and for the buildings for the female insane and feebleminded by Bagwell Plumbing and Heating company, of Durham, at $7,488; heating installation for the building for males will be done by Blow at $5,400 and for the other two buildings by Carolina Heating and Engineering company, of Durham, at $11,400.

Some slight alterations were made in original plans before award of contracts and provision was made for 28 strong-rooms for violently insane persons. By the latter change the institution was able to get $11,000 additional in state funds under a special 1935 law.

**RALEIGH, N. C.**
**NEWS OBSERVER**

NOV 29 1935

## No Color In Health

Undoubtedly valuable will be the new public health service for the advancement of health work among the Negro race which is being established by the State Board of Health in cooperation with the Julius Rosenwald Fund. At the same time it ought to be said that there is no such thing as public health among Negroes alone or public health among white people alone. No color line is possible in pathology. The disease that moves through the Negro sections of the South goes straight into the homes of white people through the cook pot, the wash pot and all the other symbols of the intimate relationships of the two races living and working together. Any move to improve the health of the Negroes of the South is an immediate move to improve the health of all the people of the South. There can, indeed, be no intelligent work for the improvement of the public health in the Southern states which does not realize that all must be saved from the ravages of disease if any are to be saved from them.

Hospitals—1935

North Carolina.

Wilmington N. C. Morning Star; Greensboro N. C. News
January 12, 1935 May 7, 1935

# NEGRO HOSPITAL SEEKING $2,000

## Colored Community Asked to Donate $1,000, White Residents the Remainder

The Community (colored) hospital has launched a campaign for $2,000 to meet emergency needs, it was announced yesterday. The colored community is being asked to contribute half of this sum, and white people are being called upon to give the remainder.

The hospital reported a deficit of more than $4,000, but Dr. F. W. Avant and Dr. Foster Burnett, staff physicians, said the pressing needs require the payment of $2,000 in the immediate future.

The colored Chamber of Commerce is sponsoring the drive, having perfected arrangements at a meeting Tuesday night.

Of the thirty available beds in the hospital, only two were vacant yesterday afternoon, and patients had been moved out of these yesterday morning. Virtually all the hospital's patients are on a charity basis.

# Committee to Study Means For Enlarging Sanatorium

## Commissioners Hear Strong Appeal For Providing Adequate Accommodations For Negro Tuberculosis Victims—Several Talks Heard.

Guilford county commissioners, meeting in monthly session yesterday afternoon, heard a strong appeal from a group of negro and white citizens for the enlargement of negro quarters at the county tuberculosis sanatorium at Jamestown.

After considerable discussion, George L. Stansbury, chairman of the board of commissioners, appointed Julius W. Cone, chairman of the sanatorium's board of directors; R. Flake Shaw and J. W. Burke, members of the board of commissioners; Dr. C. W. Banner, chairman of the board of directors of L. Richardson Memorial hospital, and Dr. S. P. Sebastian, medical director of L. Richardson Memorial hospital, as a committee to consider and recommend means whereby the enlargement can be accomplished.

**Committee Report Presented.**

This action came after the presentation by Dr. Sebastian of the following report of the findings of a committee appointed recently at a mass meeting of negro citizens:

"On March 18, 1935, a mass meeting of colored citizens of Greensboro was called for the purpose of considering the provision made for the care of colored tubercular sick in Guilford county. During the discussion it was brought out that the negro population in Guilford county is about one-fifth, or 20 per cent, and there are only 10 beds available for negro tubercular patients; that, further, accommodation is provided for colored patients in a frame building in the back of the main building that was intended primarily as a garage.

"It is reported that for a number of years colored tubercular sick have made applications for entrance to the sanatorium, but on account of the few beds available they had to be placed on a 'waiting list' and that on many occasions when a vacancy occurred the waiting patient was either dead or dying. This condition still persists. On the other hand there is, we understand, very adequate provision for white patients and a preventorium for white children. Those who lecture to the negro on the disease of tuberculosis tell them from time to time that they are dying from tuberculosis, that they have not acquired the immunity as have white people and are an easy prey to the disease on that account, that on account of the high death rate among negroes the percentage of casualities in the state and county is greater when compared with other communities.

**No Bitterness.**

"Granting the truth that negroes are more susceptible to tuberculosis and are dying more rapidly from the ravages of this disease than other people, we feel that the provision for taking care of tubercular sick among colored people is very inadequate. In fact, it is in inverse ratio. As brought out by one member of this committee, if equal accommodation were given the negroes, bed for bed, it would be more in keeping with requirements since there are more tubercular patients among the negroes and they are more susceptible. Provision ought to be made to take care of those who are invected at an early date so as to minimize the spread of this disease among others.

"We are therefore, appealing to you for better provision for the negro people of this county at the sanatorium by providing a greater number of beds and better appointment and in making this appeal we are doing so with no bitterness or resentment. As a matter of fact disease is an interracial thing and knows no color. In a good many of the best white families of this county negroes are employed in one capacity or another and especially in taking care of young children and it does seem to this committee that self-protection at least would lead those in authority to be anxious for the health conditions among the people with whom they are thrown in such close contact * * *."

In addition to Dr. Sebastian, this petition was signed by Rev. P. D. Lehman, Dr. F. D. Bluford, Rev. R. T. Weatherby and Watson Law as members of the negro citizens' committee.

**Several Make Talks.**

Following the presentation of the petition, Dr. Banner spoke briefly, stating that the 12 beds provided at the sanatorium for the 20,000 negro citizens in Greensboro is not enough. He said there can surely be no differences of opinion as to the need for the additional facilities, that the main question is the raising of funds. He pointed out that there has been suggested the addition of a wing to L. Richardson Memorial hospital to be devoted exclusively to negro tubercular sick, but that the Duke foundation is unwilling to advance any money for the project.

Following him, Dr. W. A. Stanbury, pastor of West Market Street Methodist church, who spoke as a comparatively new comer to Greensboro, expressed the hope that something might be done to relieve the situation.

Dr. J. Clyde Turner, pastor of the First Baptist church, spoke feelingly on the subject, he said, because 25 years ago he came to Greensboro from a tuberculosis sanatorium where he had received treatment. He told of having secured statistics from Dr. R. M. Buie, county health director, showing that the negro death rate in the county had increased last year.

There was some suggestion that the present negro quarters at the sanatorium were added as a sort of "after thought."

**Wrong Impression Corrected.**

Mr. Cone corrected this impression however. He explained that, when the sanatorium was first erected, it was almost impossible to get negro patients to enter it so that the 12 beds provided for them were vacant. As a result, he said, this section was set aside as a place for the "incurables" and, when at last the negroes became educated to the idea of going to the sanatorium, the extra quarters had to be set up.

Mr. Cone spoke further on the matter. He pointed out that tuberculosis is no local problem and cannot be stamped out by purely local efforts. He expressed the fear that, if Guilford takes the lead in providing facilities, it will inherit numerous tuberculous families from adjoining counties, which are without facilities entirely. He hoped that the federal government, which "has so many billions with which to build underpasses to save lives, may also be interested in building sanatoriums to save lives."

Mr. Stansbury pointed out that it would be more economical to erect additional facilities at the present sanatorium site than to make an addition to L. Richardson hospital. He presented figures prepared by Willis Booth, county accountant, showing that the county's hospital expenses this year will run around $75,000 of the prospective $82,000 income for that purpose and asked how much good could be accomplished by an additional $5,000 to $7,000. He was advised by Dr. M. D. Bonner, superintendent of the sanatorium, that under the present arrangement, the expenditure of this additional amount would not bring benefits sufficient to justify it.

It was at this point that the committee was appointed to make a study of the best method of procedure.

# *Harlem Hospital---Still*

HAD NOTHING MORE resulted from the recent Harlem riots than the testimony given before the Mayor's Committee last Friday on conditions in Harlem Hospital, then that economic upheaval could not have been altogether in vain. For one of the first times in the decade that the local institution has reeked to high heavens, an official body of the city administration has set out to expose some of the conditions in Harlem Hospital.

From the testimony of Albert M. Boyce, the committee's special investigator, and Dr. Ralph H. Young, associate surgeon at the institution, it was revealed Friday that Harlem Hospital is woefully overcrowded, that its fire and refrigeration facilities are practically useless, that its nurses are so overworked that at least 14 per cent of them are tubercular, that the ambulance service is obsolete, that the hospital kitchen is "dirty," that the linen supply is insufficient, and that the general discipline and supervision of the institution is "poor." 6-1-35

It was further shown that there is no emergency ward in the hospital and that emergency cases are taken directly into the general ward. These wards are already so crowded that the patients are placed on cots, stretchers and chairs in the corridors. Dr. Young testified that seniority counts for nothing on the staff and that a doctor's promotion depends on "who is behind you and the pull you have with those in power." Incidentally, Dr. Young stated that he expected to be fired for having the nerve to testify

about these despicable conditions.

As shocking as is the testimony of these two witnesses, their revelations only scratch the surface of the evils of Harlem Hospital. For more than a decade The Amsterdam News has consistently attacked the administration of the institution and demanded a correction of conditions there. It has repeatedly exposed not only the evils listed above, but it has outlined the vicious discrimination practiced against Negro doctors and nurses in an institution which serves the greatest Negro community in the world.

It is not strange that Dr. S. S. Goldwater declined to accept two invitations of the committee to attend the hearings on Harlem Hospital. The hospital commissioner has long known of the disgraceful conditions there and he has by no means done all that he could to rectify them. Dr. Charles H. Roberts, chairman of the Mayor's Committee, was more than justified in bitterly scoring Dr. Goldwater's action—and inaction.

But merely scoring the commissioner is not enough All the blame cannot be attached to Dr. Goldwater. The more than 200,000 Negro residents of Harlem, through their apathy, must bear part of the responsibility for the evils of the local institution. These evils have existed there mainly because they have been allowed to exist. They will continue to exist until Harlemites take a leaf from the book of the Committee of Equal Opportunities which recently forced the appointment of five Negro doctors to the staff of the new Queensboro General Hospital.

Residents of Queens, under the sponsorship of the Committee for Equal Opportunities, formed a united front of all civic, social and religious organizations—a united front led by a Democrat, a Republican and a Communist—and conducted an unrelenting mass fight until their ends were achieved. They refused to be swayed by pseudo-leaders who had hopes of personal aggrandizement; they refused to allow their ranks to be split by politically ambitious mountebanks. They picked their goal and marched straight to it.

Until Harlemites of all faiths and creeds can achieve a similar united front, they may never hope to see the end of the disgraceful conditions in Harlem Hospital.

Winston Salem, N. C.
SENTINEL
Journal
JUN 29 1935

## *Needed: A Hospital for Negroes*

The percentage of Negroes in proportion to the total population of Winston-Salem is high. Over 30,000, or more than one-third of the people here, are colored men, women and children. These people do not have adequate hospital facilities.

For the 30,000 and more Negro residents in Winston-Salem there is no separate hospital of any description. And there isn't sufficient room, equipment and medical service for both the white and colored race groups at the City Memorial Hospital.

This condition should be remedied through the establishment of a Negro hospital to be operated by the City of Winston-Salem.

It is a deplorable situation for a city to allow over one-third of its population no adequate hospital facilities. This condition is not only detrimental to the health and progress of the colored race. It seriously endangers the health and progress of the entire population.

Now when federal aid for such enterprises is available and a chance exists that additional help may be received from the Duke Endowment, or other philanthropic organizations, the city should not hesitate in its duty toward the colored race, and the whole municipality.

It should take the necessary steps to establish a hospital for Negroes.

Gastonia N. C. Gazette
August 6 1935

## Will Abandon Colored Hospital

Decision to abandon the colored hospital in Gastonia was reached by the board of county commissioners at their Monday meeting, after it had been disclosed to them that the maintenance of the institution was costing the county much more than the patients could be cared for elsewhere. The city of Gastonia and the county jointly maintain the institution. The county apportions $800 a year to its support.

It was pointed out by Mrs. Gertrude Keller Clinton, former welfare superintendent and still treasurer of the hospital, that repairs costing a sizable sum of money are badly needed, and that it was the opinion of the board of directors that the institution's usefulness would hardly justify the expenditure of such a sum of money. The board felt that the negro charity patients could be cared for at less expense in other colored hospitals.

Winston-Salem Journal
Oct 31 1935

**GETS $103,000**

The board of trustees of the State Hospital for the Colored Insane, at Goldsboro, has announced acceptance of a PWA grant of approximately $103,000 representing 45 per cent of the $230,000 project for construction of three new buildings there.

WINSTON SALEM, N. C.
JOURNAL

## *The Negro Hospital*

Prospects for the establishment of a hospital for colored folk in Winston-Salem look brighter, now that Superintendent Whittington, of the City Memorial Hospital, has recommended such an institution and the hospital board has taken the matter under advisement.

It has been apparent for sometime that facilities for the care of Negro patients in Winston-Salem have been woefully inadequate. They have received treatment at City Memorial Hospital in limited numbers but the rapid increase of patients, white and colored, at that establishment has led to an impasse, as indicated by Dr. Whittington's report. An increase of 20 patients for the past six months over the corresponding period in 1934, is announced, and this indicates very clearly that the climax in congestion will soon be reached.

Dr. Whittington recommends a Negro hospital of at least 100 beds, and suggests using the old Highlands School building as a nucleus for such a hospital. This suggestion seems to lie in the direction of economy and might be acted upon with a minimum of costs resulting.

Certainly Winston-Salem cannot go much longer without establishing more adequate facilities for its colored population. And no better time will appear for initiative in this field than the present.

Gastonia, N. C. Gazette
November 4, 1935

## For A Colored Hospital.

The Gazette a few days ago mentioned the great need of a colored hospital in the county. Surprise was expressed that no plan had been devolved toward obtaining some of the free money that seems to be flowing from Washington for any and all kinds of "projects," to be devoted to re-equipping the abandoned colored hospital here, The Salisbury Post says:

"The Gastonia Gazette wonders why with so much money flying around out of Washington something could not be done for the colored hospital in the Gaston capital.

"There, points out The Gazette, is a case of real and genuine need and not a thing has been done about it.

"Doubtless the point is well taken. Doubtless much money has been spent in raking leaves from one place to another, but no consideration given to this worthwhile project.

"What too many are interested in, is getting the money piled up for general distribution, for scattering where the picking will be good for themselves.

"The Gazette is to be commended for its interest in the hospital and in placing federal money where it will do real and lasting good. In speaking of the matter the Gastonia paper says:

"There is a case of real and genuine need, folks, yet not a thing is being done about it. Why could it not be incorporated in the list of WPA projects? We are literally throwing away money on many other things in the county which are not half as worthy and as badly needed as hospital facilities for the colored people of the county.

"Is not this something that ought to be of serious moment to those who are behind these many other projects which are said to be bringing hundreds of thousands of dollars into the county?"

The matter is still with us, folks. If there is anything needed in this county, it is a hospital for the colored population. We understand that colored patients in need of emergency treatment or operations have to be taken to Charlotte or Lincolnton. Is it right that these people should be subjected to delays like this? If it is at all possible to obtain some of this WPA money for such a project, it seems that this should be one of our most urgent demands.

Hospitals- 1935

Oklahoma

# McCORMICK IS NEW HEAD OF TAFT HOSPITAL

## Boley Bank Holdup Hero in Charge of Institution for Oklahoma Insane

3-8-35

TAFT, Okla.—Herbert C. McCormick, hero in the Boley bank hold-up in 1932, has been appointed superintendent of the Oklahoma State Hospital for Insane Negroes and business manager for the State School for Negro Girls and the Deaf, Blind and Orphan institute, all located here. He began his duties March 1.

McCormick, appointed by Governor Marland who during his campaign promised to put a Negro in charge of the new hospital for the insane, succeeds W. H. Robins, white, who was placed in charge by former Governor William H. Murray when the hospital was opened last year.

McCormick is a business man of wide experience. He was the first bookkeeper of the First National bank in Boley for two years and cashier of the same bank for five years. He was employed as bookkeeper and assistant cashier of the Farmers and Merchants bank in Boley for three years and when the two banks were consolidated he was assistant litigating agent.

**Killed Floyd's Lieutenant**

It was while he was at the Farmers and Merchants bank that McCormick gained nation-wide fame when he shot and killed George Birdwell, member of Charles "Pretty Boy" Floyd's gang of outlaws during the holdup of the bank on November 23, 1932. D. J. Turner, president of the bank and mayor of Ecley, was killed by Birdwell a few seconds before the bandit was felled by a shot from McCormick's gun.

For his bravery in killing the bandit, McCormick was made a major on the staff of Governor Murray and received a $250 reward paid under Oklahoma law to the captor of a bank robber, dead or alive. He also received $500 from the Oklahoma Bankers association, white.

McCormick is a native of Alabama. He moved to Oklahoma in 1892. Before he became associated with banks, he was assistant postmaster of Boley for four years and American express agent for three years.

The hospital for the insane will be one year old on Friday, March 15. Built at a cost of $500,000 it was formally dedicated at a mammoth celebration August 4, 1934, at which time former Governor Murray was the principal speaker.

There are 73 employes of the institution and 600 inmates. At the D. B. and O. institute, located across the street from the hospital, there are 38 employes and 412 pupils, making a total of 111 employes and 1,012 inmates in the two institutions, both of which McCormick is the business manager.

**The Logical Man**

The appointment of McCormick was pushed by Leon C. Phillips, speaker of the Oklahoma state house; Senator Don Wilbanks, F. N. Shoemake, Senator Broadus, H. B. Drake, Colonel Bowles, Mr. Richards and the board of affairs.

Mr. Nichols, chairman of the board of affairs, said that he had looked over the entire state for a man to head the insane hospital and that McCormick seemed to be the logical man.

The new superintendent said that it is his desire to make the hospital the best plant in the United States.

McCormick is married and the father of seven children, Jean, Velma, H. C., Olonzo, Keith, Voris and Robert.

Hospitals-1935.

South Carolina.

Columbia, S. C. State
September 25, 1935

# Classroom for Negro Nurses Built at Columbia Hospital

## H. H. McGill, Superintendent, Announces Construction Almost Complete and Tells of Other Recent Improvements, Including Installation of Water Fountain in Rear Court

H. H. McGill, superintendent of the Columbia hospital, announced yesterday morning that the construction of the new classroom and recreation hall for Negro student nurses would be completed shortly.

The classroom and recreation hall is being constructed on the ground floor of the old building, in a large, airy room facing Hampton street, which is admirably suited for classroom and recreational purposes.

Two Negro student nursing classes have been enrolled at the Columbia hospital, this year, one in April and the second in September. These are the first Negro student nurses to be received at the hospital for training and Negro classes will be taken in regularly from now on.

Another improvement being made at the Columbia hospital is the installation of a water fountain in the court in rear of the main building. Flowers and shrubbery will be placed around the fountain to make the courtyard attractive to the eyes of patients in the rooms surrounding the court.

Red and green lights flash on the fountain at night. The stream of water is thrown 15 feet in the air.

The new clinic rooms at the hospital have been completed and are in operation. Waiting rooms for both white and Negro out-patients are now provided. The clinic is equipped with the latest equipment.

Another recent improvement at the hospital was the installation of a laundry addition which enables all the hospital laundrying to be done in a day shift instead of requiring a day and night shift as formerly. This improvement results in a large saving in coal used for the laundry.

The above innovations are part of the Columbia hospital's program of steady improvement, which has resulted in making the Columbia hospital one of the South's leading institutions for the care of the sick and injured.

Hospitals - 1935

South Carolina.

Greenwood, S. C. Index-Journal
February 6, 1935

## Plan Negro Hospital

John F. Clarkson, civic leader of Newberry, writes that the Newberry Lions club is planning a hospital for negroes in that city or county. The club has appointed a committee to meet with a group of negroes with a view of planning a negro hospital. Until the preliminary meeting is held it may be impossible to say just what are the chances of getting such a hospital, but a need for the institution is believed to exist.

Orangeburg, S. C., Observer
March 1, 1935

## City May Have Negro Hospital

Standardized Negro hospitals will be built at several cities in this state, of which Orangeburg is one. It is part of a national hospitalizing plan now being worked out and made operative.

J. W. Felton, state supervisor of Negro education and Gov. Olin Johnston have endorsed the move, as has also the Columbia Chamber of Commerce and the University of South Carolina. Rev. Amos H. Carnegie, of New York, is in charge of the nation-wide subscription campaign to raise 150 million dollars for this work. It is aimed to give the 12,000,000 Negroes in the United States a better health and medical service, yet it is a non-profit proposition.

Orangeburg, S. C., Observer
May 10, 1935

## Fulmer Proposes Negro Hospital For Orangeburg

Congressman Fulmer Tuesday introduced a bill appropriating $500,000 with which to equip a veterans' hospital exclusively for Negroes in South Carolina and adjoining states.

It would be located either in or near Orangeburg. This action follows close on the heels of a meeting held in Washington about ten days ago between leading World War veterans and Gen. Frank T. Hines, administrator of veterans' affairs, and others relative to enlargement of the Columbia hospital, either in the way of increasing the size of the present buildings there or adding others.

Whether the bill introduced today would have any bearing on the general plan of enlarging the Columbia buildings will probably not be known until General Hines has had an opportunity to make further investigation of the matter, especially regarding the feasibility of indorsing the plan for a separate hospital for the exclusive use of people at or near Orangeburg.

Columbia, S. C. State
May 8, 1935

## FULMER PROPOSES NEGRO HOSPITAL

### Would Have Government Build in or Near Orangeburg.

Special to The State.

Washington, May 7.—Congressman Fulmer today introduced a bill appropriating $500,000 with which to equip a veterans' hospital exclusively for Negroes in South Carolina and adjoining states.

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P. H. McG.

Columbia, S. C. State
May 19, 1935

# South Carolina Sanatorium

## WORK STARTED TWENTY YEARS AGO

### Dr. Ernest Cooper Superintendent Whole Time.

## FIRST PATIENT, 1915

### Institution for Care of Tuberculosis Sick Has Admitted 3,657 Patients.

Editor's Note: The following story concerning the history and development of the South Carolina sanatorium, which is situated at State Park near Columbia, during the 20 years since its founding, is reprinted here from "SoCaSan Piper," monthly magazine published by and for patients of the sanatorium.

As a mere record of dates history is dry and uninteresting but history that relates the worthwhile efforts and accomplishments of men and women is vivid and powerful. Thus this record of the South Carolina sanatorium, so interwoven with the lives of many unselfish people, cannot be written except in its relation to the labor of those public servants who through the years have worked tirelessly to build a state sanatorium adequate to care for the thousands of tuberculous sufferers in South Carolina.

In 1914 the legislature appropriated $15,000 for the purpose of establishing a sanatorium for the treatment of tuberculosis. Behind this modest appropriation were two courageous personalities, both suferers from the disease—the Honorable George R. Rembert, representative from Richland county and Dr. John L. Dawson, president of the South Carolina Medical society and professor of medicine at the South Carolina Medical college. After Doctor Dawson's recovery from tuberculosis he set out to aid others in the fight for health. He was one of the first to work for a statewide organization to combat tuberculosis and his extensive campaign did much to convince citizens that a state sanitorium was necessary.

**Rembert Arouses Legislature.**

George R. Rembert deserves the credit for arousing the legislature to the point of action. He did not live to see his work realized but his widow, Mrs. Annie Iredell Rembert, took up the project and aided in carrying it through to a successful completion. Mrs. Rembert, herself took the coveted bill to Governor Cole. L. Blease and stood by as he affixed his signature to the paper that was to bring relief and healing to unnumbered thousands.

The bill placed the sanatorium project under the supervision of the state board of health and early in 1914 they secured a tract of land, containing approximately 200 acres, part of the State Hospital farm at State Park. Situated about seven miles from Columbia on a high ridge of sand hills, this location was considered ideal.

At a meeting of the executive committee of the state board of health the infant hospital was given the name of "South Carolina sanatorium," and a special committee of the state board was designated to administer its affairs. Composing this committee were Dr. Robert Wilson, Charleston, chairman; Dr. C. C. Gambrell, Abbeville; Dr. W. J. Burdell, Lugoff and Dr. James A. Hayne, Columbia.

**Appoint Cooper.**

In April, 1915, the state board of health held its regular annual meeting in Greenwood and appointed Dr. Ernest Cooper, Columbia, as medical superintendent of the South Carolina sanatorium. Mrs. J. N. Burt, Dillon, was named matron and Kathleen Crawford, R. N., Chester county, was selected as nurse. Doctor Cooper arrived at the sanatorium the first week in May, 1915. From that date progress has been slowly but steadily in force.

The first patient, Arthur H. Jones, Ridge Spring, was admitted May 22, 1915. Dr. D. B. Frantis, a member of the state board of health, was Mr. Jones' physician. The patient was examined and sent to his building, a long open-air pavilion with a capacity for 16 patients. Outside the long expanse of porch one viewed a wilderness of scrub oaks. Just two buildings set down in a small clearing. Off in the distance could be heard the tinkle of a bell on a lone cow, the sanatorium's complete dairy herd! One mule and wagon made up the sum total of live stock. A desolate country and one lone six man! Be it said in behalf of Mr. Jones he rose courageously to the occasion and spent one night in a model caretaker. The next day the repacked the freshly unpacked suitcase. Twice he left and returned before others came to dispel his solitude. Under date, June 13, The State records that the sanatorium had admitted four patients and others were scheduled to arrive.

**Accommodations Added.**

In 1916 a second pavilion was provided to accommodate 16 women patients. This was erected to the left of the administration building. August 16, 1916, the first woman patient, Miss Annie I. Herbert, Newberry, was admitted. With the advent of women, life took on more zest and many a lively story of these first 32 patients has survived through the vicissitudes of 20 years.

In February, 1917, Mrs. Annie I. Rembert was elected full time field secretary. She gave generously of her time and efforts to the upbuilding of the sanatorium. We quote from the general report of Dr. Robert Wilson, Jr., chairman executive committee, state board of health for the year 1917: "The growing interest in the state sanatorium for the treatment of tuberculosis is most gratifying and the increasing popularity of this institution is due in a large measure to the untiring efforts of the field secretary, Mrs. Annie I. Rembert."

In 1917 the legislature appropriated $40,000 for the erection of a 24 bed infirmary, a kitchen and a dining room with a seating capacity of 100. These buildings were opened for the reception of patients in 1919.

**Negro Division Included.**

In answer to a crying need for a place for the hospitalization of Negroes, an appropriation made by the general assembly, supplemented by a fund raised by the Negroes themselves, was used for the building of Palmetto hall. This division accommodated 13 men and 13 women and was opened in 1920.

In 1922 Oakview cottage with accommodation for 26 white women was opened. Miss Carrie Spivey, one of the supervising nurses at that time, worked most energetically to interest the general assembly in making the appropriation for the building. The furniture was supplied by public donations, each bed being marked by a metal plate bearing the name of the contributor.

The next building added to the plant, and one that filled a very definite need was the infirmary for women with a capacity of 24 beds. It was opened in 1925. In 1928 a 12 bed annex was added. This annex was destroyed by fire in December 1931. It was replaced in 1932 by the addition of six rooms to one of the wings of DuRant hall, the insurance covering the cost.

**Place for Children.**

By 1924, through experience with contact cases, the sanatorium authorities became convinced of the need for a building to be used for the care of tuberculous children. Through the joint effort of the South Carolina Federation of Women's Clubs and the South Carolina Council of Farm Women funds were secured from the legislature for the erection of a building and contributions from interested citizens to cover the cost of furnishing it. In recognition of the valuable time, effort and interest given to the building by Fred S. Campbell, it was named Campbell hall.

This building was opened in 1927 and is a complete unit of 48 beds with a staff of nurses, a culinary department, and a school that is maintained during 12 months of the year. At present admission is limited to

# Twenty Years of Service

children between the ages of six and 12.

The South Carolina Grand Lodge of Free Masons has provided two buildings, the Masonic cottage, opened in 1928 which houses 16 ambulant men, and an infirmary designed to care for 48 women. This building, opened in 1929, was named DuRant hall in honor of Charlton DuRant, past grand master of the Masonic order, beginner of the Masonic tuberculosis movement in South Carolina, and long a loyal friend of the sanatorium. The furnishings for DuRant hall were donated by local Masonic lodges of South Carolina. Doctor DuRant led the campaign for the raising of the funds for these two buildings, which when built and furnished were presented to the state board of health, trustees of the santorium.

**Ernest Cooper Building.**

The last building added to the sanatorium group is the beautiful two-story, fireproof building—the Ernest Cooper Community building, named in honor of Doctor Cooper. It was erected by funds raised exclusively through the efforts of the patients themselves, the labor being furnished by the Richland county relief council. The building houses the various patient activties and is equipped with a sound picture machine and a public address system that carries all entertainments to the bedside of infirmary patients. This building fills a long felt need for a place of religious and recreational activities. Numerous other buildings for the accommodation of the sanatorium personnel have been added from time to time but space forbids a detailed description of each.

Following is a general summary of the entire plant:

White Section: Two pavilions for men and two for women designed to care for ambulant patients, one infirmary for men and two for women to care for bed patients; a children's building called Campbell hall.

Negro Section: A pavilion with one ward for men and one for women, and an infirmary.

Staff: Three homes for physicians, a nurses' home, a dairyman's home and a farmer's home.

Miscellaneous: An administration building; a hall containing dining room, kitchen, pantry, store rooms, and a basement for the furnaces; a dairy with modern equipment; barns, about a dozen laborers' cottages and the community building.

**New Deal for Tuberculous.**

"Time and tide wait for no man." This is the day of a "New Deal" for the tuberculous. Watchful waiting, conservatism and loss of time at the expense of the patient's heath have forever gone into the discard, and the sufferer of today may gaze blissfully and with renewed hope upon the green pastures and blue skies of artificial pneumothrax and modern thoracic surgery. The sanitorium offers to all its patients treatment, rest and recreation. For those unfortunates further along the tuberculous pathway, there are units equipped with special facilities for successful treatment. Suitable cases have the benefit of pneumothorax, and thoracoplasty, and for diagnostic purposes there are x-ray and fluoroscopy.

Since the opening 20 years ago the sanitorium has admitted approximately 3,657 patients, discharged 2,961, and 499 have died. Of the patients discharged 383 had childhood type tuberculosis, 396 minimal, 787 were moderately advanced, 1,102 were far advanced and 202 were non-tuberculous; 1,037 of the tuberculous patients or 30 per cent. were unimproved, 1,924 or 70 per cent. showed improvement.

The staff physicians have examined thousands of out-patients, referred by physicians of the state, for the purpose of diagnosis. The x-ray department, operating since about 1931, had made more than 4,000 chest radiograps, and thousands of fluoroscopies have been done.

Twenty years of inspiration, foresight and co-operation between the superintendent, his medical and nursing staffs, and patients have resulted in a successful and progressive administration.

**Dream Realized.**

The South Carolina sanatorium is the fruition of a long fostered dream of the state board of health, the trustees and managers of the affairs of the institution during its entire history. The personnel of the board has changed through the years, but every man who has served has possessed foresight and ability and has been personally devoted to the best interests of the sanatorium.

Two member of the present board were members when the sanatorium was established 20 years ago. They are Dr. E. A. Hines, and Dr. James A. Hayne. Doctor Hayne has been executive secretary for 24 years. From the beginning of the sanatorium movement his interest in the institution and his efforts to promote its welfare have never flagged. Doctor Hayne is also state health officer and has gained wide recognition both sectionally and nationally as an authority in his chosen field.

**Three women have filled the office** of field secretary. The first was Mrs. Annie I. Rembert, who resigned in 1921. She was succeeded by Miss Chauncey Blackburn, now Mrs. D. McL. McDonald, who resigned in 1923 to become executive secretary of the South Carolina Tuberculosis association. These women served with distinction and ability. The present secretary, Mrs. James R. Cain, assumed her duties in 1923. For 12 years Mrs. Cain has been working for the best interests of the institution and the comfort and happiness of the patients.

**Physicians on Staff.**

Physicians who have rendered efficient service in assisting Doctor Cooper with the work are the late Dr. Rivers Claytor, the late Dr. J C. Bonner, the late Dr. W. M. Lester Dr. W. G. Byerly, Dr. T. S. Thomason and the present staff. Dr. Leo F Hall, first assistant; Dr. Rudolph Farmer and Dr. George C. Battle resident surgeon; Dr. George H Bunch, volunteer surgeon; Dr. A. R Burnside, volunteer surgeon, and Dr Thomas A. Pitts, volunteer x-ray consultant.

Many nurses employed at the sanatorium have done praiseworthy work Miss Pearl Leitzsey, the present superintendent of nurses, has the distinction of serving over the longest period of years. In her official position she supplies each patient's needs with understanding sympathy and love.

The immortal Emerson once wrote, "A great institution is the lengthened shadow of one man." As we have traced the history of the sanatorium's steady growth it has become obvious that this splendid achievement reflects the spirit of the man whose hand and mind have guided its destinies through two decades. That man is Dr. Ernest Cooper.

**Tribute to Cooper.**

In celebrating the 20th anniversary of the opening of the sanatorium we congratulate Doctor Cooper, its first and only superintendent, whose ability as administrator has brought this institution from an insignificant unit of several beds to a modern up-to-date sanatorium of 278 beds, with the probability of reaching 500 beds in the near future.

These 20 years bear eloquent witness of how well fitted Doctor Cooper was for the position of superintendent. During these years he has served diligently and loyally the people of South Carolina in such a way as to bring him the distinction of being recognized as an authority on the treatment of tuberculosis. Although working under severe financial handicap he has kept the institution abreast of the latest methods in the treatment of tuberculosis. As chief executive Doctor Cooper's sole thought has been the welfare of his patients and the advancement of the sanatorium. His work here is immortal.

**Cooper's Achievements.**

Doctor Cooper is a native of Mecklenburg county, North Carolina. He received his preparatory education in Charlotte, N. C., and his collegiate education at Clemson college and the University of South Carolina, graduating from the latter with the class of 1900, receiving the degree of bachelor of arts. He took the medical course at Johns Hopkins university, graduating in 1910. After leaving Johns Hopkins, he did laboratory work and the general practice of medicine in Columbia until 1915, when he was elected the superintendent of the South Carolina sanatorium. As Doctor Cooper journeys on through life, may he have that contenment of mind and innermost feeling of happiness that come from the knowledge of work well done.

In the cycle of time 20 years are a short span, but when measured by service to humanity in the alleviation of suffering and the cure of disease they are a long stride in splendid achievement. The South Carolina sanatorium has made this stride. As "great oaks from little acorns grow," so it has grown from a small seedling to a sturdy plant, extending its sheltering branches for the healing of the sick and the protection of the well.

**DR. ERNEST COOPER.**

**Superintendent and medical director of the South Carolina sanatorium at State Park since its opening in May, 1915.**

Hospitals - 1935

Tennessee

## RACE DOCTOR HITS HOSPITAL PRACTICES

CHATTANOOGA, Tenn., Aug. 13. —Charges that the white internes at Erlanger Hospital, the Chattanooga city hospital, use Negro patients to experiment on instead of guinea pigs, were made here yesterday by Dr. E. L. Scott, Negro physician.

Dr. Scott cited seven specific instances of "brutality' neglect and gross inefficiency." He stated that discrimination against Negro patients covered a long period of years. The heads of Erlanger Hospital issued a blanket "denial" of the charges.

# Adventists Buy Sanitarium For Southern Constituency

NASHVILLE, Tenn. (ANP).—In response to the insistence of its Negro constituency, the General Conference of Seventh-day Adventists last week completed purchase of the former Riverside Sanitarium, three miles out of Nashville, overlooking the Cumberland River and adjoining properties to the extent of forty-five acres, for the establishment of a sanitarium and nurses' training school for colored young people.

The new institution is scheduled to open in March, 1936, but the first board has already held a meeting and Dr. H. E. Ford, X-ray specialist of the Hinsdale Sanitarium, Hinsdale Ill., will take over active duties in connection with the project about the first of the year.

A substantial appropriation has been made to the new sanitarium and a forty-thousand dollar building program has just been authorized.

The sanitarium will bear the name of its predecessor, the Riverside Sanitarium, which for years was conducted independently, as a service of love, by Mrs. A. Drullard.

Texas

Hospitals- 1935

**PORT ARTHUR, TEX.**
**NEWS**

MAY 3 1935

## Sanatorium For Negros

SPEAKING of comparative racial tuberculosis statistics in the southern states the president of the national association says that "although the states in the south rank high in total tuberculosis mortality as compared with the other states in the country, it is quite obviously the effect of the high mortality among the colored sector of the population."

This is advanced as a reason why Texas should have a sanatorium for tubercular negros: First, to lower the death rate from tuberculosis. Second, to protect the families of the white race from infection through contact with tuberculosis. Third, to stop the economic loss each year from deaths from tuberculosis among negros. Fourth, that Texas should take its place among other states in the care for the health of its citizens.

A reminder: The only place where there is a bed for a tubercular negro is behind the bars of the penitentiary or on the prison farms of the commonwealth.

# T.B. HOSPITAL MAY BE ERECTED NEAR HOUSTON

Informer 5-24-35 Houston Texas

HOUSTON.—The passing of the bill, granting an appropriation for the erection of a Negro Tuberculosis hospital for Texas caused national comment. Texas has long been in need of a hospital to care for the tubercular cases among Negroes and to safeguard the lives of other individuals.

A number of cities in Texas are endeavoring to have the hospital built in or near them. Dr. S. T. C. Guild, field secretary of the National Tuberculosis Association, who is engaged in conducting a southern health survey for the purpose of promoting the control of Tuberculosis in southern cities, expressed the fact that Houston and surrounding communities are very much in need of a hospital of this kind.

A meeting of the state committee on this project was held on Friday and Saturday of last week to name the location of the hospital. No information has been given out as to just what definite steps will be taken, for a definite place has not been decided. It is reported however that it is agreed that the hospital must be built wheer there is a large Negro population.

Since Houston has such a dense Negro population, it has equal chances with any other city to have the hospital built in Houston or in the vicinity.

No definite location of the institution is provided for in the bill. The bill was introduced by Senator Beck and Representaive H. L. McKee.

**'Meritorious Measure'**

In signing the bill Governor Allred said:

"In my judgement, this is one of the most meritorious measures passed by the legislature.

Negroes and friends of the race and humanity in the state have been waging a consistent and persistent effort for several years for such an institution.

The statewide committee of the Lone Star State Medical, Dental and Pharmaceutical association, of which Dr. G. T. Coleman of Marshall, is chairman and Dr. C. W. Pemberton, Houston, is secretary, rallied support to the measure from all sections of the state and from many influential sources, including the Texas Commission on Interracial Cooperation and East Texas Chamber of Commerce.

**Leaders Pushed Fight**

Other prominent Texas Negroes serving on this tuberculosis hospital committee were: Dr. C. R. Yerwood, Dr. E. H. Givens, Austin; Dr. C. A. Whittier, Dr. E. L. Grimes,

# GOVERNOR OF TEXAS SIGNS HOSPITAL BILL

Informer 5-11-35 Kansas City Mo

## Tubercular Sanatorium for Negroes to Cost $200,000

AUSTIN. — A bill establishing and maintaining a state-supported tuberculosis sanatorium for Negroes of the state was enacted by the state legislature and signed by Governor James V. Allred Friday, May 3.

Negro citizens had urged the necessity of a tubercular hospital for Negroes for a number of years. This measure known as house bill No. 467 appropriates $200,000 for the establishment of such a sanatorium and provides a site not to exceed 100 acres of land.

## Nothing Less Than Tragic

Something of the waste and inefficiency of the economic system under which we live can be gleaned from the full column article which appeared in last Sunday's Houston Chronicle about the Houston Negro Hospital. The following quotation reveals a situation which, in the opinion of THE INFORMER, is nothing less than tragic: Informer

"With 50 beds, modern X-ray equipment, including a portable machine; modern laboratories and operating rooms, a staff of both white and Negro physicians and surgeons, this institution is equipped to provide complete hospital service to the Negro citizens of the community. **Yet the daily average number of patients is only 15 to 18."** 4-6-35

Everybody knows that there are hundreds of Negroes who need the service which this hospital is equipped to give. Everybody knows also that from time to time Negroes die because they cannot get this service. It seems to THE INFORMER a fair guess that, if every Negro who needs hospitalization such as the Houston Negro Hospital affords, could get it, fifty beds would prove quite inadequate. Houston Texas

We do not try to fix the blame beyond the vague responsibility of the "system," whatever that may be. We only know that there is cruelty in a situation where hundreds of people need the fifty beds which a modern hospital affords, but only "15 to 18" of them get a chance to use those beds.

**FORT WORTH, TEX.**
**EVENING STAR TELEGRAM**

JUL 26 1935

## Negro Tubercular Hospital.

GOING EARLY TO BAT for Crockett as the site for the state tubercular hospital for negroes authorized by the last Legislature, the Houston *Chronicle* makes the reasonable argument that all things being equal the hospital should be located in Southeast Texas as being most convenient to the bulk of the population it is intended to serve. The *Chronicle* then argues the point that a tubercular hospital in that region would be as useful as one anywhere else in combating tuberculosis.

There will probably be no wide disagreement with the Houston paper's position. Modern understanding of tuberculosis gives much smaller odds to climate than formerly. Some of the most effective of tubercular hospitalization projects are located in regions which, a few years ago, would have been utterly condemned for this purpose. In such circumstances, it seems that nothing stands in the way of locating the new state institution for negroes where it will be readily available to the greatest number of Texas' negro citizens. This undoubtedly calls for a site somewhere in Southeast Texas.

Crockett has put in the first bid. Indeed, that city had a leading part in the movement which resulted in the appropriation for the hospital by the Legislature. It seems likely that because of that city's interest in the project, a hospital located there will find surroundings best calculated to promote its widest usefulness.

HOUSTON, TEX.
CHRONICLE

JUL 23 19

## The Crockett Bid

The new state tubercular hospital for negroes should be established in East Texas. Since Crockett is the only town making an active campaign for its location, (for some site in Houston County), East Texas in general should get behind the Crockett bid.

Numerous noted physicians have formally approved of Houston County as a desirable location, as viewed from the health standpoint. Unless they can be shown to be in error, there is no single reason why the hospital should be taken from East Texas.

The large majority of Texas negroes live in East Texas. Most of them are not financially able to make long trips from home. A hospital located at the nearest point to most of them would necessarily be placed in or near Houston County. The negro patient will fare best if he feels near his family and friends.

The Crockett Chamber of Commerce became interested in the need for a state tubercular hospital for negroes years ago. It secured the aid and interest of the East Texas Chamber of Commerce, and has conducted a statewide campaign in behalf of the proposed institution. Gradually the Texas public was awakened to the fact that the need was urgent, that no final success against the tubercular plague could be hoped for until a determined drive against the disease among negroes was undertaken.

In the end the people were convinced, and approved the establishment of a state hospital. Crockett is due more credit for that result than any other town in the state. Its long and intelligent interest in the subject indicates that it probably would continue to have an interest in it, would co-operate with officials of the proposed establishment to enable it to do the greatest possible amount of good.

## *15-Room Hospital For Group Opened*

DENISON, Tex., Nov. 8.—A 15-room Race hospital was opened here with appropriate exercises by Dr. J. M. Holloway on October 24. A speaker of the other race addressed a mass meeting of Race people at Quinn Chapel, under the auspices of the Colored Civic League, for the purpose of gaining the interest of the Race and cooperation in the benefits to be derived by the operation of the new institution.

Hospitals-1935

Texas.

**NEGRO PERSONNEL—**

While the tone sounds a little too "Uncle Tomish," I think that all of Negro Texas should stand behind the petition which the special committee from the Negro medical men of the state has addressed to the board of control, urging that Negro personnel be used in the new Texas Tuberculosis Sanitorium for Negroes. It would be a monumental travesty on justice and an insult to the million Negroes of the state which would ring to high heaven, to man this all-Negro institution with white doctors and white nurses.

In the first place there are competent Negro doctors and nurses who are capable of running the institution. In the second place white people are already taking too many of the jobs which Negroes held heretofore, and these few jobs should go to Negroes. In the third place Negroes will be taxed to support this as all other state institutions, and since Negroes are given no place in the running of the white institutions of the state, fairness to Negro taxpayers requires that our own institutions at least be opened freely to our trained young men and women.

9-14-35

I think the committee might just as well have left out all reference to "our cherished Southern customs," for the board of control will remember them all too well without Negroes mentioning them. I think also that the statement that it "is undesirable to the best qualified white physicians" to serve Negroes is in the main untrue, as Negro doctors whose practice is cut in on so tremendously by white physicians of all classes, know too well. It seems to me further that reference to white nurses serving Negro men as patients was entirely out of place. White men do not need any suggestion from Negroes about protecting their alleged superiority; they will do that far too much of their own accord.

But the main purpose of the petition,—namely, to secure an all-Negro personnel for the new Negro sanitorium,— is commendable and should find unanimous support among the million Negroes of Texas.